



**Economic and Social Council**

Distr.  
GENERAL

E/1997/61  
13 May 1997

ORIGINAL: ENGLISH

Substantive session of 1997  
Geneva, 30 June-25 July 1997  
Item 7 (a) and (b) of the  
provisional agenda\*

REPORTS, CONCLUSIONS AND RECOMMENDATIONS OF SUBSIDIARY  
BODIES: ECONOMIC AND ENVIRONMENTAL QUESTIONS

Consumer protection

Report of the Secretary-General

SUMMARY

The present report, submitted in compliance with Economic and Social Council resolution 1995/53, reviews progress achieved in the implementation of the guidelines for consumer protection. It notes the steps that have been taken by Governments at the national level, as well as regional and international cooperation, to promote consumer protection.

The report highlights the results emanating from regional conferences/seminars held over the past two years in the African and Asia and Pacific regions, and makes a number of recommendations for the consideration of the Council concerning the further implementation of the guidelines - including calling for closer cooperation among the concerned organizations of the United Nations system - and concerning the encouragement and strengthening of the broad coalition and partnership existing between the United Nations, international consumer organizations, donors and host Governments in this area. It is also suggested that, based on the results achieved at regional conferences and seminars, an interregional expert group be convened to develop guidelines on sustainable consumption patterns.

\* E/1997/100.



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## INTRODUCTION

1. The Economic and Social Council, in its resolution 1995/53 of 28 July 1995 on consumer protection, urged Governments to continue their efforts to implement the guidelines on consumer protection, including by creating appropriate legal frameworks and establishing means to develop, implement and monitor policies and programmes for consumer protection. The Council also recognized the role of civil society, in particular non-governmental organizations, in promoting the implementation of the guidelines. And noting the recommendation of the Commission on Sustainable Development that the guidelines for consumer protection be expanded to include guidelines for sustainable consumption patterns,<sup>1</sup> the Council requested the Secretary-General, in cooperation with the development funds and programmes of the United Nations, the regional commissions and other relevant organizations and bodies of the United Nations system, to continue to provide assistance to Governments, at their request, in implementing the guidelines for consumer protection, to elaborate guidelines in the area of sustainable consumption patterns, taking into account the work undertaken in other intergovernmental forums, and to examine the possible extension of those guidelines into other areas. Finally, the Council requested the Secretary-General to submit a report to it at its substantive session of 1997 on the implementation of the resolution; the present report has been prepared in response to that request.

2. The guidelines for consumer protection, which were adopted by the General Assembly in its resolution 39/248 of 9 April 1985, represent an internationally accepted regulatory framework that serves as a basis for the elaboration and strengthening of national policies and legislation in the area of consumer protection. They are intended to protect citizens as consumers through the implementation of a set of principles of fair and reasonable standards covering physical safety; the promotion and protection of consumers' economic interests; standards for the safety and quality of goods and services; distribution facilities; redress; and education and information. They also promote international cooperation in this area.

3. Since the adoption of the guidelines, vast changes have taken place in the global marketplace that make it necessary to assess the impact of the guidelines, not only to ensure that intended results have been achieved but also to assess the relevance of the guidelines in the light of new economic trends. The globalization of financial markets and liberalization of trade, the growing interdependence among countries, the emergence of borderless economic spaces and deregulation in many areas of economic activity have transformed the world economy, and are creating new dynamics in the functioning of the international markets that directly affect the consumer.

4. The present report reviews the progress achieved in the period between 1995 and 1996 at the national, regional and international levels in the implementation of the guidelines for consumer protection. It covers activities undertaken by Governments, the programmes, funds and organizations of the United Nations system, and other intergovernmental organizations in implementing the guidelines. It also reviews activities undertaken by civil society, in particular non-governmental organizations, concerned with issues of consumer

protection. In this context, progress towards the extension of the guidelines to the area of sustainable consumption patterns and other areas is reviewed, and recommendations are made for future action to expand the scope of the guidelines.

## I. IMPLEMENTATION OF MEASURES FOR CONSUMER PROTECTION

### A. Progress at the national level

5. The role of Governments in the protection of consumers in the modern market remains vital, in particular in the areas of policy-making, legislation and the development of institutional capacity for the enforcement of consumer law. The Economic and Social Council, in its resolutions 1988/61, 1990/85 and 1995/53, has encouraged Governments to provide a legal framework and maintain a strong consumer policy for the protection of consumers.

6. In countries where Governments are initiating action for consumer protection, the guidelines define an essential point of departure for elaborating policies and legislation in order to protect the consumer in such areas as health and safety, access to goods and services, and measures for redress. In other countries, the guidelines generally continue to serve as an instrument to assist Governments in identifying areas where further supportive actions are necessary for the protection of citizens as consumers.

7. In the period under review, a number of Governments have reported that they have made use of and cited the guidelines as a framework for their efforts to develop and strengthen consumer protection policy and legislation. The action undertaken includes the establishment of ministries and offices concerned specifically with issues of consumer affairs; the formulation of national consumer policy and relevant laws and acts; the elaboration of competition law; the elaboration of consumer education programmes and the dissemination of consumer protection information; and the promotion of participation by consumers' organizations in aspects of the decision-making process in areas of consumer protection.

8. Some countries have reported the existence within their Governments of specific ministries and/or ministers for consumer affairs. These include Sweden, Estonia, and Trinidad and Tobago, while other countries, such as Norway, Cyprus, Slovenia, Belarus, Denmark and Mexico, have established departments and/or offices concerned solely with consumer protection. A commission for the protection of the consumer has been established in Peru, and Portugal has established a consumer institute and a national consumer council for promoting and safeguarding consumer rights and executing measures aimed at their protection. In Australia, the minister of the Government responsible for small business and consumer affairs, with the assistance of an advisory council of consumer affairs, is responsible for issues related to consumer protection, and government ministers responsible for consumer affairs have also been appointed at the state and territory levels. In addition, Australia has established a ministerial council on consumer affairs, which includes the ministers responsible for fair trading, consumer protection laws, trade measurement and credit law at the state and territory levels. Zimbabwe has established an

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institutional structure for consumer protection, involving several ministries and departments.

9. Generally, Governments continue to indicate the usefulness of the framework of the guidelines for consumer protection in the consideration of the development of consumer policy and law and related codes for the protection of the consumer (Cyprus, Mexico, Ecuador, Italy, Estonia and Lithuania); the adoption of state policy on consumer protection (Belarus); the incorporation of elements of the guidelines (physical safety, consumers' economic interests, redress measures) in consumer protection law (Peru); and as an important point of reference in the encouragement of activities in this area (Germany). Australia has developed policies for consumer protection at the national, state and territory levels in line with all the elements of the guidelines. Portugal has established a comprehensive legal system on consumer protection through the adoption of a law which includes provisions to protect the users of essential public services, such as water, electricity, gas and telephone services. Slovenia is currently in the process of preparing a law on consumer protection, and the Government of Oman is in the process of establishing guidelines for consumer protection.

10. A number of countries are promoting activities related to the elaboration and enforcement of competition law and policy, and are addressing consumer protection issues in that context. Australia has established a competition and consumer commission, and is implementing provisions of competition policy at the state and territory levels with a view to developing a competitive economic environment with uniform rules and rights for consumers and business. Zimbabwe has enacted a competition law, and it is envisaged that a trade competition commission, to be established in the near future, will be administering such a law. Cyprus is implementing a competition law, while Bolivia is currently preparing a code on the workings and functioning of markets that will include issues of consumer protection and competition. Ecuador, Italy, Mexico, Estonia and Lithuania are undertaking work in the formulation of related competition policy and law.

11. In such countries as Cyprus, Ghana, Sweden, Lithuania, Denmark and Mexico, a number of activities have focused on the formulation and/or strengthening of standards, regulations and rules on food and products safety. In Australia, activities have included the introduction of strategies to reduce or remove physical hazards associated with consumer products, the enhancement of product safety standards and their enforcement, and the introduction of credit and industry codes, including dispute resolution schemes.

12. Governments have also carried out educational outreach programmes, including the use of media and advertising and the organization of symposia, conferences and seminars. A two-day symposium on food security and nutrition was organized in Trinidad and Tobago in commemoration of the World Consumers Rights Day. A programme for the dissemination of information to consumers was developed in Peru on that occasion, and Belarus commemorated the event under the slogan "Safe products for all". Training activities, including seminars and workshops on issues of consumer protection, have also taken place in Peru.

13. The European Conference on Consumer Education in Schools, held at Stockholm in 1993, established the European Network of Consumer Educators, which has since started the publication of its newsletter Nice-Mail. The Internet is being used as a medium for disseminating consumer education. For example, the Norwegian Consumer Council has a home page on the School Network of the Norwegian Centre for Educational Resources, and Australia is considering the use of this mechanism for the dissemination of information on product recall provisions. Related courses have been introduced in the Norwegian secondary school system, and also at the primary level in Denmark. Belarus expects to develop in 1997 a pilot programme on "consumer literacy" for students in vocational and technical schools, and also at intermediate and higher educational institutions. The bulletin Consumption with Care, published in Peru, provides consumer information on such issues as consumer rights, availability of goods and services, and redress measures.

14. Activities related to product testing and dissemination of relevant information through the media have been supported directly by Governments or through consumer organizations in Slovenia and Belarus, among other countries. Hotline telephone services have been established in Belarus to provide advice to consumers as well as institutes for consumer protection. Measures for facilitating redress to consumers also include the use of telephone services (hotlines), for example in Peru, where this service accounts for over three fourths of consumers' complaints. The United States of America is pursuing consumer protection activities in the areas of telecommunication, protection of personal data and telemarketing.

15. Activities for promoting international cooperation include the provision of advisory assistance and the sharing of information and training. Trinidad and Tobago provided on-the-job training to officers of other member States of the Caribbean Community on issues of consumer protection, and Australia, through support provided to the South Pacific Consumer Protection Programme, has assisted in the development of consumer legislation and promotion of consumer organizations in South Pacific island States, such as Papua New Guinea, Solomon Islands, Samoa and Tonga. Australia has promoted training activities through the exchange of staff involved in issues of consumer affairs with Canada and New Zealand.

16. Governments recognize the important role of civil society, in particular non-governmental organizations, in promoting consumer protection. In a number of countries, such as Trinidad and Tobago, Ghana, Togo, Ecuador, Mexico, Italy, Slovenia, Belarus and Portugal, collaborative relations have been developed between government offices and consumer associations. Germany has continued to support consumer organizations that focus on consumer information and advice in the food sector, energy conservation, and environmentally sound consumer behaviour. Support has also been provided to consumer organizations in the organization of training seminars for the dissemination of consumer information, the elaboration of programmes on consumer education in schools, the protection of consumers on issues of redress and solution of complaints. The Government of Zimbabwe has continued to support a related non-governmental organization working in this area, thus creating an enabling environment for such organizations to undertake many activities. These include consumer education and awareness programmes, assistance in the monitoring and enforcement of

standards (food, quality of goods and services), and in the formulation of legislation, such as contracts, and the establishment of dispute solving mechanisms, among others. A consumer education centre has been established in Belarus on the initiative of consumer organizations. In Cyprus, consumer associations have been participating in consumer consultative committees to enhance the role of the consumer in the decision-making process related to consumer issues.

#### B. Regional and international cooperation

17. The Economic and Social Council, by its resolution 1995/53, recognized the important role of civil society, in particular non-governmental organizations, in promoting the implementation of the guidelines for consumer protection. The Department for Policy Coordination and Sustainable Development of the United Nations Secretariat has worked closely with the most prominent non-governmental organization in the area of consumer protection, Consumers International, both through its headquarters and its regional offices in Africa, Europe, Asia and Latin America, in activities designed to promote the implementation of the guidelines.

18. A salient feature of this collaboration has been the organization since early 1987 of a series of regional seminars and conferences on consumer protection. These seminars and conferences assist in bringing together all the actors from both the public and private sectors concerned with issues of consumer protection for exchange of ideas and experiences, help to disseminate information on developments, and establish the groundwork for legislative and institutional development in the various regions on this area.

19. During the period under review, Consumers International, in collaboration with the Department for Policy Coordination and Sustainable Development and with the support of the European Union and the Government of Zimbabwe, organized the Africa Conference on Consumer Protection, which was held at Harare from 28 April to 2 May 1996. Government officials from over 35 African countries, consumer leaders and experts from countries of the region, and members of the international community concerned with issues of consumer protection attended the Conference. The Conference launched the Model Law for Africa, designed to protect the African consumer and serve as a guide for African Governments in their efforts to develop appropriate policies and legislation and enforcement mechanisms in this area. Ghana has already indicated that the Model Law for Africa is being studied for use in the elaboration of its national consumer protection policy.

20. The Conference recognized the important progress being achieved in the promotion of the guidelines for consumer protection in Africa. It stressed the need for the countries of the region to strengthen measures to enact and enforce consumer protection policies and legislation, since there were still 16 countries in the region that did not have consumer organizations or bodies concerned with issues of consumer protection. That was particularly important and urgent in the light of the growing globalization and liberalization of the world economy, and the potential impact of those trends on consumers at the national level. A number of areas that required the special attention of the

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countries of the region were identified, in particular health, safety, access to basic services and measures for redress. The Conference also examined the extension of the guidelines into other areas, such as sustainable consumption patterns.

21. In January 1997, Consumers International, through its regional office for Asia and the Pacific, and the Consumer Unity and Trust Society of India organized an international conference at New Delhi on the theme "Consumers in the global age", in cooperation with the Department for Policy Coordination and Sustainable Development and with the support of the European Commission, the Governments of India, the Netherlands and Sweden, and the United Nations Development Programme (UNDP). Other non-governmental organizations, such as Consumers Union and the Freidrich Ebert Foundation, also provided support for the conference. The event was the second meeting on consumer protection for the countries of the region; the first, a regional seminar, was held at Bangkok in June 1990.

22. The conference at New Delhi was attended by over 200 participants from Governments, intergovernmental organizations, international and national non-governmental organizations and experts from over 30 countries. The conference reviewed the progress achieved in the implementation of the guidelines for consumer protection in the countries of the region, and considered the issue of the extension of the guidelines into other areas. Progress was made towards the elaboration of a model law for consumer protection for the Asia and Pacific region. At the conference, an Asia and Pacific consumer protection network of government officials of the countries of the region was established, which a number of countries have already joined.

23. In Europe, the European Commission, apart from providing support for the above-mentioned conferences and seminars, continues to adopt legislation, regulations and directives in the field of consumer policy. The Commission's priorities for consumer policy in the period 1996-1998 included 10 broad areas of action, among which are efforts to improve the education and information of consumers, the protection of consumers' interests in the supply of essential services of public utility, increased consumer representation, consumer aspects of financial services, the improvement of consumer confidence in foodstuffs, and the encouragement of a practical approach to sustainable consumption.

24. A number of countries, in particular Norway, Sweden, Italy, Slovenia, Estonia and Cyprus, have stressed the importance of the role of the European Commission in consumer protection. Italy, Norway and Sweden have taken steps to adapt their national policy on consumer protection to European Union laws, regulations and directives, and Slovenia has indicated that it will adapt its law on consumer protection, currently under elaboration, to European Commission directives. Italy's approach to its national consumer policy is based almost entirely on European Commission guidelines. Germany has considered the directives of the European Commission on various issues of consumer protection, in particular on general food safety issues, insurance legislation and regulations on the establishment of contracts, and will adjust its national law on competition to European Union competition legislation. Sweden is working actively for strengthened consumer influence within the Union, while strongly supporting current work within the Union in connection with distant sales, price

information, transborder payments, guarantees, the solution of disputes and questions related to foodstuffs. Sweden and Norway are active participants in the eco-labelling programme within the European Union, under which, so far, some 900 products have been awarded the Nordic Swan marking of excellence/quality.

25. The majority of member countries of the Organisation for Economic Cooperation and Development (OECD) have institutional and regulatory frameworks in the field of consumer policy that generally cover all the elements of the guidelines for consumer protection. The OECD Committee on Consumer Policy follows closely the implementation of the guidelines in OECD member countries.

### C. The United Nations system

26. Consumer protection issues are receiving increasing attention from the organizations of the United Nations system.

27. The Department for Policy Coordination and Sustainable Development has not only developed a network of collaboration and partnership with non-governmental organizations and relevant intergovernmental organizations but also works closely in this area with concerned organizations of the system, such as UNDP, the United Nations Conference on Trade and Development (UNCTAD), the regional commissions and the specialized agencies, with a view to ensuring the effective use of its limited resources to maximize the impact of its activities. More specifically, in the area of consumer safety, the Department continues to collaborate with World Health Organization (WHO) and the United Nations Environment Programme/International Register of Potentially Toxic Chemicals in the publication of the Consolidated List of Products Whose Consumption and/or Sale Have Been Banned, Withdrawn, Severely Restricted or not Approved by Governments. The List consolidates all information on products harmful to health and the environment, and contains information on regulatory actions taken by 94 Governments on over 700 pharmaceuticals, agricultural and industrial chemicals. In addition to WHO and the United Nations Environment Programme (UNEP), the World Trade Organization (WTO), the Food and Agriculture Organization of the United Nations (FAO) and the International Labour Organization (ILO) also participate in this activity. The List is widely used by Governments and non-governmental organizations in their efforts to consider the scope for regulatory measures.

28. UNCTAD has continued its activities for the promotion and protection of consumers through its advisory services and technical assistance programme. The Set of Multilaterally Agreed Equitable Principles and Rules for the Control of Restrictive Business Practices (A/C.2/35/6, annex), adopted by the General Assembly in its resolution 35/63 of 5 December 1980, was revalidated by the Third United Nations Conference to Review all Aspects of the Set in 1995. In addressing the area of competition law and policy, UNCTAD promotes innovative activities by industry leading to a greater variety of goods and services, and lower prices. With the financial support of UNDP and bilateral donors, UNCTAD provides advisory services to national competition law agencies, organizes workshops and seminars, and prepares technical studies and reports on issues of competition policy and law. These programmes, directed in particular to

developing countries and economies in transition, also assist in adapting to the process of globalization and liberalization of trade.

29. At its ninth session, held at Midrand, South Africa, in 1996, UNCTAD gave prominence to consumer protection issues (see TD 378, paras. 29, 43, 91 (III) and 97 (ii)). Thus, related work of UNCTAD will focus on the examination of the relevance of consumer protection and competition to development, and will support strategies for promoting national competition. UNCTAD and the Department for Policy Coordination and Sustainable Development of the United Nations Secretariat will work closely in gathering information on the extent to which countries have elaborated consumer protection legislation, as well as on existing arrangements for the implementation of such legislation.

30. The UNEP Code of Ethics on the International Trade in Chemicals encourages high levels of ethical conduct for private-sector parties engaged in the production and management of chemicals, by setting out principles governing standards for the environmentally sound management of chemicals in international trade.

31. In the period under review, the Economic Commission for Europe (ECE) focused on the elaboration of standards for perishable produce. The ECE intergovernmental party on the standardization of perishable produce and quantity development, in cooperation with the FAO/WHO Codex Alimentarius Commission, has elaborated commercial quality standards for perishable produce. The standards facilitate trade between exporters and importers, and also provide information on health and general consumer protection criteria. Workshops and training seminars on commercial quality standards have taken place in Eastern European countries to ensure adequate product quality control and promote the awareness of consumers. Standards on processed, semi-processed and raw foods, including food hygiene and additives, pesticide residues, contaminants, labelling and presentation, as well as methods of analysis and sampling, have also been developed. Current negotiations on the protocols on nitrogen oxides and related substances of persistent organic pollutants and heavy metals increasingly address human health-related questions. In addition, action has been started to ban or restrict the use of 15 toxic pesticides and other chemicals with implications of health risks.

32. The Economic Commission for Latin America and the Caribbean (ECLAC) continues to collaborate with Consumers International in the area of consumer protection, including consumer legislation, trade, economic integration and consumer protection, public services and sustainable consumption. ECLAC participated in the third Consumers International regional conference for Latin America and the Caribbean on economic integration and consumer protection, held at Sao Paulo in October 1995, and it also participated in the first European and Latin American Consumers' Congress, held at Madrid in November 1995, which dealt with issues of legislation, development and consumer protection.

33. The World Food Programme (WFP) observes specific recommendations of the Codex Alimentarius Commission in the area of food safety and security. All shipments of food, including international and local purchases of food products (which constitute approximately half of WFP's annual food purchases), follow

these recommendations. WFP also meets the Commission requirements in terms of the marking and labelling of commodities it distributes.

34. WFP has disseminated its logistic experience on distribution facilities and quality control in a number of countries through training of counterpart staff involved in transport and storage of commodities, and in the establishment and improvement of harbour and warehousing facilities, distribution centres and transport systems.

35. In cooperation with the United Nations Children's Fund (UNICEF), WFP has carried out nutrition education campaigns targeted to vulnerable groups of population, in particular children, including schoolchildren, pregnant women and nursing mothers. WFP follows established guidelines for the distribution of milk products while promoting breastfeeding practices.

36. FAO pays particular attention to the protection of consumers against health hazards and economic losses associated with contaminated and/or adulterated foods.

37. The joint FAO/WHO Codex Alimentarius Commission, comprising 156 member countries, has continued to formulate international standards and codes of practice on a wide range of food commodities, as well as recommendations on issues related to food safety. Generally, those standards are adopted and incorporated in national legislation. The Uruguay Round of multilateral trade agreements also recognized those standards as the benchmark for quality and safety requirements for food in international trade. The Commission promotes the adoption of open date marketing and ingredient labelling, and it has adopted a code of ethics related to the trade of food.

38. During the period under review, a number of joint FAO/WHO activities have taken place: an expert committee on food additives carried out evaluations on the toxicity of food additives, its technical uses, and specifications for its identity and purity, and provided advice on the acceptance levels of dietary intake of food additives, contaminants, and residues of veterinary drugs in animal products; an expert consultation on the application of risk analysis to food standards provided advice on the use of risk analysis principles in food standards development; a similar consultation on risk management made recommendations on the application of risk management in food safety matters; and a meeting on pesticide residues evaluated the toxicity of pesticide residues in food, and provided recommendations on the acceptable levels of those residues within the context of international trade. Those recommendations represent the basis for related rules established by the Codex Alimentarius Commission.

39. In addition, a joint FAO/WHO consultation on the preparation and use of food-based dietary guidelines and an FAO expert consultation on nutrition education for the public produced a number of recommendations on issues of nutrition education. The resulting publication, Get the Best from Your Food, has been translated into several languages and adapted for use in a number of countries, and two resource books, Human Nutrition in the Developing World and Food, Nutrition and Agriculture for African Teachers, under publication, should assist in training activities in nutrition, consumer protection and food security. An FAO meeting on the integration of consumer interest in food

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control, for the countries of the Latin America and Caribbean region, adopted recommendations to enhance the participation of consumer representatives in the decision-making process related to food quality control, consumer education and awareness.

40. The UNEP/FAO programme on prior informed consent with respect to agricultural, industrial and consumer chemicals, in which 125 countries participate, is expected to become legally binding in the near future. In accordance with the provisions of the programme, an international shipment of a chemical or pesticide that is banned or severely restricted or is known to be causing health or environmental problems will not proceed without the explicit agreement of the designated national authority in the importing country. Any decision banning or severely restricting the import of a chemical must also apply equally to production for domestic use.

41. The United Nations Industrial Development Organization (UNIDO) programme on risk reduction in the agrochemical industry, comprising the regional network for pesticides in Asia and the Pacific, and the Afro-Arabic network for risk reduction in agrochemicals development, has included the development of guidelines and the adoption of international standards on agrochemicals production and use.

42. UNIDO, in cooperation with UNICEF and UNDP, also promotes the use of iodized salt for the elimination of iodine deficiency disorders; data collection, quality control and control of the iodine content of salt have been emphasized. Attention has also been given to work related to pharmaceuticals. A project entitled "Integrated development of national pharmaceutical industry", conducted in the Syrian Arab Republic, included the provision of advisory services for the elaboration of related policy and legislation, including consumer protection. A project entitled "Development of the pharmaceutical industry", conducted in Thailand, included the establishment of the Pharmaceutical Technology Service Centre of Thailand. The Centre has assisted 125 pharmaceutical enterprises in obtaining certification on good manufacturing practices, is assisting the pharmaceutical industry in the procurement of export licences, and is also cooperating with organizations of the United Nations, such as the Economic and Social Commission for Asia and the Pacific (ESCAP), WHO and the World Bank.

43. A joint venture between UNIDO and the International Vaccine Institute of Seoul, Republic of Korea, included two global training workshops on quality assurance, good manufacturing practices and quality control for vaccine manufacturing, and management of vaccine manufacturing enterprises. These workshops, held at Bandung, Indonesia, and Beijing, respectively, also addressed consumer protection issues, such as adverse reactions to immunization and more generally of customer satisfaction. Workshops on good manufacturing practices in the pharmaceutical sector and on validation of pharmaceutical manufacturing processes took place at Montreal and at Bogota, respectively, and were aimed at introducing quality management systems.

44. The International Civil Aviation Organization (ICAO) revised the code of conduct for the regulation and operation of computer reservation systems, which was subsequently adopted by the ICAO Council. The code provides, inter alia,

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for the safeguarding of the privacy of personal data of passengers, including the requirement that air passengers using computer reservation systems for booking and ticketing flights be kept informed of code-shared flights that involve two or more operators.

45. ICAO has published a manual on the regulation of international air transport to promote the dissemination of information and advice for air transport users and shippers. The publication, entitled "Policy and guidance material on the regulation of international air transport", provides information on international air fares and rates, including rules and conditions associated with scheduled passenger fares, information on baggage allowances and charges to passengers, and related redress and compensation measures.

46. As recommended by the ICAO conference on international air transport regulation of 1994 (see ICAO/Doc. 9644), the work of ICAO will continue to take into account the promotion of consumers' economic interests.

#### D. Non-governmental organizations

47. As noted above, the collaborative relationship established between the Department for Policy Coordination and Sustainable Development of the United Nations Secretariat and civil society, in particular non-governmental organizations concerned with issues of consumer protection, such as Consumers International, continues to be strengthened. Without the leadership provided by Consumers International and the close United Nations cooperation with it that has developed over the years, it would not have been possible to carry out the international programme of regional seminars and conferences within existing resources.

48. Currently, discussions are being undertaken on the formulation of a memorandum of understanding between Consumers International, the Department for Policy Coordination and Sustainable Development of the United Nations Secretariat and UNCTAD to strengthen international assistance for consumer protection policy and legislation through a programme of joint action. It is intended that Consumers International, the Department and UNCTAD will cooperate, inter alia, in the promotion of national consumer protection law and consumer protection policy formulation, including issues covered in the guidelines for consumer protection, the Midrand Declaration on technical cooperation in this area (see para. 29 above), the development of national and international competition law, and research on consumers issues, including sustainable development and consumption patterns.

49. The International Cooperative Alliance (ICA), a non-governmental organization serving the world cooperative movement and bringing together more than 200 national and international cooperative organizations from nearly 100 countries, devotes nearly 25 per cent of its resources to the consumer sector. ICA holds consultative status with the Economic and Social Council. Consumer cooperatives, in providing goods and services specified by consumers, contribute to the promotion of consumer awareness and education. Generally, such organizations contribute to achieving consumer rights at the national and international levels. In particular, through its subsidiary body, the

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International Consumer Cooperative Organization, issues of standards of safety and healthy environment, access to goods at fair prices with reasonable variety and choice, access to information on goods and education on consumer information are being advanced by the cooperative movement.

## II. THE GUIDELINES FOR CONSUMER PROTECTION AND SUSTAINABLE CONSUMPTION PATTERNS

50. The issue of sustainable consumption patterns was raised in a global context at the United Nations Conference on Environment and Development (UNCED), held at Rio de Janeiro, in 1992, where it was embodied in chapter 4 of Agenda 21.

51. A more environmentally conscious consumer public, combined with increased interest on the part of industry in providing environmentally sound consumer products, is an important dimension of sustainable consumption. Consumer consciousness of the link between consumption and the environment has increased. But although consumers may be more aware of their greater responsibility in the relationship between environment and consumption patterns, that awareness can only be translated into action if consumers are given the necessary information to make the right choices and thus bring about environmentally sound consumption patterns and lifestyles.

52. The role of Governments in shaping consumption patterns, in particular in countries where the public sector plays an important role in the economy, continues to be of utmost importance. A number of Governments have reported on the progress being made in that area of work. Germany has promoted projects in the field of environmental advice to foster environmentally oriented product information and awareness aimed at achieving environmentally sound consumer behaviour. Norway has developed a project entitled "Green Household Budget", by which information and advice on purchasing and use of products towards sustainable production is provided to consumers. Norway has also hosted two international conferences on sustainable production and consumption: a ministerial round table held at Oslo and an international conference on sustainable consumption, held at Lillehammer. As a result of those meetings, the Norwegian Research Council has established a research programme on sustainable production and consumption. Also, the Governments of Brazil and Norway organized a symposium on sustainable production and consumption patterns at Brasilia from 25 to 28 November 1996. The results of the meeting concentrated on the policy options available for making patterns of consumption and production more sustainable. The meeting agreed that consumption and production patterns is an issue that has the common interest of and deserves additional international cooperation between industrialized and developing countries.

53. The United States of America has been promoting the achievement of sustainable consumption through a public outreach and education programme of its Environmental Protection Agency. This office also maintains an Internet site on recycling and the use of recycled products. The Consumers Office of Mexico promotes the dissemination of information to consumers on consumption and environmental protection, the adequate use of energy, recycling measures, and

carries on training programmes for sustainable development. An international forum on the theme "Consumption at the end of the millennium" dealt with issues of consumption, consumers organizations and advertising and media.

54. Sweden considers that the extension of the guidelines for consumer protection should be part of consumer policy at the level of the European Union, and also within the framework of the Nordic Council of Ministers and OECD. OECD considers the area of sustainable consumption as an important field to be included in relevant guidelines for consumer protection. Currently, an overview of member countries' activities on issues concerning sustainable consumption patterns is being prepared by OECD.

55. As noted earlier, with the rapidly changing international economic environment, consumer organizations have expressed the need to review the guidelines for consumer protection and to expand their scope to cover new areas where consumer protection is desirable. Interest has been indicated, for example, in extending the guidelines to include issues of public utilities in such areas as telecommunication and transport services, where there may be a growing need to protect consumers' interests. Another area of concern embodies the service sector, in which insurance, banking and investment, as well as lending and borrowing conditions, have all been transformed by the use of new technology and more competitive markets.

56. The Africa Conference on Consumer Protection (see paras. 19 and 20 above) considered possible guidelines for issues of basic services, including public utilities (health, water, electricity, gas); financial services (credit reporting with privacy protection, regulated rates and terms, disclosure of costs and terms of credit); and consumer representation (representation in trade negotiations, setting of products standards, and the need for mechanisms for consumer participation in decision-making processes). The Asia and Pacific conference on the theme "Consumers in the global age" (see paras. 21 and 22 above) identified elements for guidelines on sustainable consumption; the active participation of consumer groups in the elaboration of guidelines and in the decision-making process; the introduction of environmental taxation or incentives and disincentives on natural resource-depleting production and consumption activities; the dissemination of verifiable information to consumers on the development of advertising codes and standards; and the regulation and verification of environmental claims. The areas of financial services, new technologies, especially in communications, and consumer services were also cited as requiring new policy provisions. Other suggestions emanating from the recent symposium on sustainable production and consumption patterns, held at Brasilia in 1997 (see para. 52 above), include the need to integrate sustainable development at the level of government decision-making with a view to ensuring that macroeconomic policies for liberalization and deregulation promote environmental improvement. Also, the importance of the role of Governments as major consumers was stressed, in that Governments can help shape markets through their use of goods and services and the incorporation of environmental criteria into procurement policies.

### III. CONCLUSIONS AND RECOMMENDATIONS

57. As indicated in the brief overview presented above, considerable progress has been made in the implementation of the guidelines for consumer protection in terms of measures undertaken for the protection of the consumer at the national level and strengthening cooperation at the regional and international levels. There has been a surge in public awareness of consumer issues, especially in terms of the sustainability of consumption patterns and the need to protect the interests of consumers in a globalized world economy. The consumer movement is gaining momentum in all regions, and public policy is being strengthened in response to those developments. But, much remains to be done, and action by Governments is essential. At the regional and international levels, the role of the United Nations system of organizations, with the support of member States and in collaboration with major groups, such as non-governmental organizations, is equally important for mobilizing support and providing assistance in adopting measures at the national level for the protection of consumers. The success of collaborative activities - such as the series of regional conferences and seminars promoted by the United Nations in collaboration with members of civil society (including non-governmental organizations, such as Consumers International), donors and host Governments - points to the need to maintain and strengthen such collaboration for the cost-effective use of limited resources in further work.

58. The Council may wish to recommend continued national and international efforts to ensure the effective implementation of the guidelines for consumer protection by all the actors concerned, including Governments, as well as to ensure continued close cooperation to that end among the organizations and bodies of the United Nations system, other intergovernmental organizations and major groups, in particular non-governmental organizations.

59. In the period ahead, the elaboration of guidelines to cover sustainable consumption patterns will require particular attention. The outcomes of the regional conferences held over the past two years, the work undertaken by intergovernmental organizations, such as OECD and the European Union, and initiatives by individual countries have all prepared the ground for a concerted effort to expand the scope of the guidelines for consumer protection to cover sustainable consumption patterns, as well as other areas, such as new information systems, telecommunication, transborder trade and consumer services, including financial services. As a first step to that end, the Council may wish to call for an interregional expert group meeting to elaborate recommendations for guidelines on sustainable consumption patterns, for submission to the Council, at its substantive session in 1998, through the Commission for Sustainable Development.

#### Notes

<sup>1</sup> See Official Records of the Economic and Social Council, 1995, Supplement No. 12 (E/1995/32), para. 45.

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Economic and Social Council

Distr.  
GENERAL

E/1997/62  
15 May 1997

ORIGINAL: ENGLISH

Substantive session of 1997  
Geneva, 30 June-25 July 1997  
Item 6 (b)

COORDINATION QUESTIONS: MULTISECTORAL  
COLLABORATION ON TOBACCO OR HEALTH

Progress made in the implementation of multisectoral  
collaboration on tobacco or health

Report of the Secretary-General

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## BACKGROUND

1. The first substantive consideration of the problem of tobacco or health was undertaken by the Economic and Social Council in 1993. By its resolution 1993/79 on multisectoral collaboration on tobacco or health, the Council requested the Secretary-General to seek the full multisectoral collaboration of the organizations and bodies of the United Nations system and other international organizations, as appropriate, in contributing to the successful implementation of effective and comprehensive strategies for tobacco control.

2. Given the mandate of the United Nations Conference on Trade and Development (UNCTAD) in the area of commodities and the need to examine the economic adjustments that countries might need to undertake in the follow-up to Council resolution 1993/79, a focal point for the issue was designated by the Secretary-General of the United Nations within UNCTAD at the end of 1993, with responsibility for the implementation of the resolution.

3. At its substantive session of 1994, having considered the report of the Secretary-General (E/1994/83), the Council adopted resolution 1994/47, in which it called on the Secretary-General to report to it, at its substantive session of 1995, on progress made by the United Nations system focal point on tobacco or health, as defined in Council resolution 1993/79.

4. At its substantive session of 1995, having considered the report of the Secretary-General (E/1995/67), the Council adopted resolution 1995/62, in which it took note of World Health Assembly resolution 48.11 (annex I), in which the Director-General of the World Health Organization (WHO) had been requested to study the feasibility of developing an international instrument on tobacco control to be adopted by the United Nations, taking into account existing trade and other conventions and treaties. The Council also recognized that several organizations and bodies of the United Nations system had implemented World Health Assembly resolution 46.8, in which the Assembly had called for a ban on the use of tobacco within the buildings of the United Nations system; requested the United Nations system focal point on tobacco or health to intensify the dialogue with organizations of the system and Member States in order to strengthen tobacco control policies; invited Member States, bilateral and non-governmental organizations and organizations of the United Nations system to provide the necessary support to enable the focal point to carry out his mandate in an effective manner; and requested the Secretary-General to report to the Council at its substantive session of 1997 on progress made by the focal point in the implementation of multisectoral collaboration on tobacco or health.

### I. FOLLOW-UP TO THE IMPLEMENTATION OF COUNCIL RESOLUTIONS ON TOBACCO OR HEALTH

5. Pursuant to the mandates of the above-mentioned resolutions, the United Nations focal point on tobacco or health established and maintained close relations with Governments, intergovernmental and non-governmental organizations, particularly in the area of information and exchange of communications among concerned organizations.

6. Given the issues raised by the resolutions on matters of health, education and welfare, the focal point also established contacts with the WHO regional offices, ministries of health, national committees of the United Nations Children's Fund (UNICEF) and ministries of education. In order to secure maximum outreach to concerned organizations the focal point contacted the regional representatives of the International Union Against Cancer, and through them their national member organizations. In mid-1996, the focal point became an active participant of GLOBALINK, an intranet service available to tobacco control experts from around the world that has become a very important source of information through its interactive electronic conferences.

A. Organizations and bodies of the United Nations system

7. In seeking to intensify the dialogue with the organizations and bodies of the United Nations system, the United Nations focal point on tobacco or health contacted over 30 United Nations entities; replies were received from most of them.

8. Many entities have participated in the efforts of the United Nations system to strengthen tobacco-control policies as they affect the working environment. Those entities most committed to the cause of creating an effective smoke-free environment on their premises have included the International Labour Organization (ILO), the International Civil Aviation Organization (ICAO), UNICEF, the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Educational, Scientific and Cultural Organization (UNESCO) and WHO. Other entities, such as the United Nations Secretariat in New York, the United Nations Offices in Geneva and Vienna, and the United Nations Institute for Training and Research (UNITAR) have instituted policies to limit smoking to restricted areas and are still in the process of re-evaluating those policies with a view to more effective implementation. Other entities have implied by their responses that the question has yet to be fully addressed. In some cases, existing tobacco-control measures are being reviewed with a view to obtaining a smoke-free environment. Many entities have also indicated that they support the World No Smoking Day. In addition, the United Nations Secretariat, the International Fund for Agricultural Development, IMO, UNIDO, the United Nations Institute for Training and Research and UNHCR offer medical assistance to staff through training sessions and/or counselling, and keep staff informed of the health hazards of smoking. The United Nations Secretariat, the World Intellectual Property Organization and WHO have established focal points on the subject in order to coordinate their response to the problem.

9. A number of United Nations entities are also undertaking or proposing to undertake substantive studies and activities in order to address tobacco-related questions.

10. The activities of the Statistical Division of the United Nations have continued to focus on the compilation and dissemination of statistics on tobacco production, consumption and trade, as well as the incidence of smoking, publishing data on those issues in its Statistical Yearbook, Compendium of Social Statistics and Indicators and Industrial Statistics Yearbook.

11. Since the publication of its study entitled "The economic role of tobacco production and exports in countries depending on tobacco as a major source of income", UNCTAD has received requests for studies on agricultural alternatives to tobacco production in developing countries that are highly dependent on tobacco production and exports. Since the economic role of tobacco production has raised interest in the Council and elsewhere, UNCTAD has submitted to the International Development Research Centre a research proposal, still under consideration, entitled "Economic aspects of development of agricultural alternatives to tobacco production and export marketing in Malawi and Zimbabwe" - the economies of those two developing countries are most dependent on tobacco exports. It is believed that that type of research could serve as a pilot study for the application of economic evaluation tools useful to many other tobacco-producing developing countries as they consider agricultural crop alternatives to tobacco production.

12. Now that nicotine has been recognized as an addictive substance, UNCTAD, in cooperation with the International Council on Alcohol and Addictions and the European Medical Association Smoking or Health, is organizing a round table that will focus on the economic and social aspects of alternative nicotine-delivery devices, such as skin patches, chewing gum and nasal inhalers.

13. The UNCTAD Division on Investment, Technology and Enterprise Development is considering undertaking a study on the role of multinational tobacco companies in the global expansion of tobacco consumption, particularly in the developing countries and countries in economic transition.

14. The United Nations Environment Programme (UNEP) has indicated that under its Environmental Law Programme Activity Centre, with its long and successful record of brokering several international conventions, protocols and other legal instruments, it can work with the United Nations system focal point, WHO and other relevant organizations in developing a framework convention on tobacco control.

15. UNICEF is increasing its support to programmes that contribute to the health and development of young people, one component of which is the prevention of tobacco consumption. It is in the process of finalizing its Notebook on Programming for Young People's Health and Development, which includes a focus on tobacco. UNICEF regional and country offices have been encouraged to strengthen their collaboration with the United Nations system and with other partners in relation to programmes that focus on preventing the use of drugs such as tobacco and alcohol. Concerned that the marketing of tobacco products is undermining its efforts to save the lives of millions of children annually from preventable diseases, UNICEF is urging a global ban on the promotion and sale of tobacco products to protect children in third world countries. Recognizing that the international community urgently needs a comprehensive, long-term strategy to combat tobacco, particularly in the developing world, UNICEF has welcomed a recent pledge by the seven major industrialized countries (Canada, France, Germany, Italy, Japan, United Kingdom of Great Britain and Northern Ireland, United States of America), Russia and European Union to work together to promote education and public awareness of the environmental hazards of tobacco smoke to children.

16. Given its involvement in the control of illicit drugs, the United Nations International Drug Control Programme (UNDCP) recognizes the health implications of tobacco use, and thus collaborates with the WHO Programme on Substance Abuse in activities that address tobacco and/or alcohol.

17. World Bank activities in the health sector (including sector work, policy dialogue and lending) discourage the use of tobacco products. The Bank does not lend directly for, invest in or guarantee investments or loans for tobacco production, processing or marketing. However, in the few countries that are heavily dependent on tobacco as a source of income and of foreign-exchange earnings (i.e., countries where tobacco accounts for more than 10 per cent of exports), especially as a source of income for poor farmers and farm workers, the Bank seeks to help those countries diversify away from tobacco production. It does not lend indirectly for tobacco production activities, although some indirect support of the tobacco economy may occur as an inseparable part of a project that has a broader set of objectives and outcomes. Also, unmanufactured and manufactured tobacco, tobacco-processing machinery and equipment, and related services are included on the negative list of imports in loan agreements, and cannot be included among imports financed under loans. Finally, tobacco and tobacco-related producer or consumer imports may be exempt from borrowers' agreement with the Bank in order to liberalize trade and reduce tariff levels.

18. The Food and Agriculture Organization of the United Nations (FAO) has reaffirmed its commitment to respond, subject to the availability of resources, to requests of member Governments wishing to investigate options for diversification away from tobacco production. FAO has not extended support or assistance for a number of years to any projects intended to expand tobacco production. At the same time, FAO has monitored developments in the production, consumption and trade of tobacco. Periodically, FAO analyses the longer-term prospects to provide a framework for evaluating the changing structure of the market for tobacco, and - through the quantification of consumption trends - the possible health implications of smoking. FAO considers that the multisectoral collaboration coordinated through the United Nations focal point on tobacco or health is an appropriate means for developing comprehensive and effective strategies, which take account of the full economic and health implications associated with tobacco production and consumption.

19. In addressing the subject of drug abuse, UNESCO includes in its educational activities - intended particularly for children and young adults - information about the dangers of tobacco. On 31 May 1996, UNESCO joined WHO and the International Olympic Committee to commemorate World No Tobacco Day under the theme of Sports and the Arts without Tobacco. The documentation on that event was distributed to the UNESCO national commissions, regional offices and the worldwide UNESCO network of associated schools (about 2,000). In addition, UNESCO, in collaboration with two French non-governmental organizations, CIPADED and Vie et santé, published a book in English, French and Arabic, entitled Farnatchi and the Mysterious Red Bag, on preventive education against tobacco use. Aimed mainly at children aged eight to 13 years in Arab-speaking countries, it was disseminated to the UNESCO national commissions and field offices in the Arab Member States. UNESCO will shortly make available on its

Internet Web site information concerning the use and dangers of tobacco, and its possible solutions.

20. WHO has played a leading role in tobacco control for many years since the establishment of the tobacco or health programme in 1990. Its plans of action 1988-1995 and 1995-2000 have provided the framework for the development of national tobacco control legislation in many countries.

21. Recognizing this critical need, the Ninth World Conference on Tobacco and Health, held in Paris in 1994, adopted a resolution urging national Governments' ministries of health and the World Health Organization to initiate action immediately to prepare and achieve an international convention on tobacco control to be adopted by the United Nations as an aid to implementation of the International Strategy for Tobacco Control adopted by the same Conference (see annex II). In May 1995, the World Health Assembly, in its resolution WHA 48.11, requested the Director-General to report to the Assembly at its forty-ninth conference on the feasibility of initiating action to prepare and finalize an international convention on tobacco control to be adopted by the United Nations, taking into account existing international trade and other conventions and treaties. The Director-General submitted his report on the feasibility of developing an international instrument for tobacco control to the WHO Executive Board at its ninety-seventh session. The report, inter alia, calls for the promulgation of an international framework convention for tobacco control and implementing protocols. The World Health Assembly adopted, by majority vote, resolution WHA 49.17 (see annex II to the present report) on the development of a WHO international framework convention for tobacco control, and a project proposal for its preparation is being implemented.

22. ICAO, at its nineteenth assembly, in 1992, adopted resolution Abbe-15 on smoking restrictions on international passenger flights. As of 1 July 1996, several States and many airlines had introduced smoking restrictions, varying from partial smoking bans on certain flights (depending on destination or maximum flight time) to a complete ban on all flights. ICAO has issued further correspondence that provides guidance and advice on the implementation of the global ban on smoking (State letter AN 5/13-96-79 of September 1996), including a questionnaire seeking information on the degree of implementation of resolution A29-15 (State letter AN 5/13-97/8 of January 1997). Some States have been hesitant to implement resolution A29-15 because they believe that legislation against smoking is difficult within the context of air law and aviation regulations. ICAO believes that a framework convention on tobacco control would assist such States in enacting the required legislation.

23. UNIDO has indicated that it is ready to assist interested countries in preparing and implementing programmes for alternative high value-added processed crops. Further to the UNCTAD proposal (see para. 11 above) on the impact of the tobacco economy in Zimbabwe and Malawi, UNIDO has indicated that a much larger study covering non-exporting, tobacco-producing developing countries, such as China and Pakistan, would be useful.

## B. Member States

24. The United Nations system focal point contacted all Member Governments with permanent missions to the United Nations Office at Geneva. The information received mainly concerned national tobacco control policies and matters of particular concern to ministries of health, education and welfare, and to some extent covered information already appearing in earlier reports. The new information provided is set out below.

### 1. Developed countries

25. Many of the developed countries reported enactment of anti-smoking regulations and legislation (Belgium, Canada, Italy, New Zealand, Norway, Sweden and the United Kingdom of Great Britain and Northern Ireland), including such measures as health warnings on packaging; taxation on tobacco products; reporting requirements for manufacturers, distributors and advertisers; bans on smoking in public places; and discouraging tobacco access to youth. Support for the development of a framework convention on tobacco control, as called for in World Health Assembly resolution 49.17, was indicated by several countries (Belgium, Canada, Germany, Sweden). Some preferred to support measures for individual countries, using the existing regulations established by the European Community (Italy and the United Kingdom). Many countries (Belgium, Canada, Denmark, Norway and Sweden) had instituted public information campaigns to sensitize the public to the health risks linked to smoking. Such activities included education and health information and anti-smoking campaigns, with some Governments targeting their campaigns to youth or women. One Government has initiated international standards to measure the contents of nicotine and tar in the smoke from roll-your-own tobacco (Norway), and another has contributed financially to programmes supporting WHO programmes that assist other countries (Canada).

### 2. Newly industrialized countries and countries in economic transition

26. The replies received from newly industrialized countries and economies in transition indicate that those countries share with the developed countries a high concern about the health risks associated with tobacco consumption. They have adopted legislation and administrative ordinances to protect the population at large, especially high-risk groups, such as the young; fiscal measures to discourage tobacco consumption; advertising bans in newspapers, radio and television; and measures to disseminate information materials for increasing public awareness of the dangers of smoking. Some of those countries (China, Russian Federation, Pakistan and Singapore) have reported that they generally disseminate information materials to increase public awareness of the dangers of smoking through hosting/organizing conferences and round tables, organizing anti-smoking public education campaigns, and in general establishing a supportive environment that is conducive to making non-smoking the norm. One Government sought multisectoral collaboration in its campaign against smoking, securing the assistance of public and private sectors. One Government (China), strongly supporting the development of a framework convention on tobacco

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control, indicated that a number of issues, such as women and tobacco, approaches to tobacco cessation, financing tobacco control and tobacco control programmes, were areas best suited to multisectoral collaboration and international cooperation. As a step towards more effective smoke control activities, some countries (Mexico and Turkey) have made improvements in data collection and research on tobacco prevention, health care and rehabilitation. Another (Czech Republic) supported the creation and proliferation of smoking-cessation clinics.

### 3. Other developing countries

27. In a large number of developing countries in Africa and in most of Asia and Latin America tobacco use is increasing among the population. According to WHO and World Bank estimates, it is precisely in this group that the risks associated with tobacco consumption is likely to be the highest in the future. According to estimates, while in 1995 tobacco consumption was responsible for 3 million deaths - 2 million in the developed countries and 1 million in the developing countries - by the year 2025, world mortality will reach 10 million - 3 million in the developed countries and 7 million in the developing countries. As the multinational tobacco companies confront increasing restrictions on their operations in the North, it is expected that they will try to compensate for the loss of markets by opening up and expanding their markets in the South.

28. Some countries have adopted a comprehensive anti-smoking policy (Cameroon, Mauritius, Oman), in some cases complemented with the training of schoolchildren and teachers on the risks of tobacco consumption on health, and the introduction of national targets for the reduction of tobacco consumption (Trinidad and Tobago). Other countries discourage smoking in public and at official gatherings, except at specified times and in specific places (Ghana, Nigeria).

29. Some countries have introduced legislation on tobacco control that places a ban on audio-visual advertisements on tobacco products via electronic media (Jamaica and Nigeria), prohibits cinema advertisement of tobacco products and advertisement of tobacco products in literature of any kind intended for persons under 18 years of age, and enforces mandatory use of health warnings of tobacco products (Jamaica).

### C. Intergovernmental organizations

30. A number of intergovernmental organizations have undertaken activities supportive of United Nations and WHO resolutions in the field of tobacco or health.

31. The Arab Bank for the Development of Africa has reported that, consistent with its lending policy of encouraging food security projects in the agricultural sector, it has not participated in the financing of any tobacco-related projects.

32. The Asian Development Bank has stated that although the Bank does not have a formal policy restriction on the financing of projects that are indirectly

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associated with tobacco, its projects do not promote nor encourage the cultivation of tobacco. The Bank realizes that because of the great difficulty in making a significant impact on the supply side given the existing favourable market conditions for tobacco, efforts should focus on reducing demand for tobacco, especially by young people. The Bank, therefore, supports efforts to limit the use of tobacco through the promotion of healthier lifestyles in the context of health projects.

33. In 1995, the Ministers of Health of the Gulf Cooperation Council adopted a resolution containing provisions concerning the restriction of nicotine and tar levels in cigarettes. The resolution also established an increase of customs duties to reach 100 per cent, and assigned a committee to work with health authorities to provide information materials for health awareness, such as media campaigns, and to introduce programmes to combat smoking. In addition, a recommendation has been made by Ministers of Industry to the concerned authorities not to issue licences for tobacco-manufacturing factories of all types.

34. The European Commission adopted on 18 December 1996 a communication to the European Council and the European Parliament on the current and proposed community role in combating tobacco consumption, in which specific reference was made to international efforts and the proposed WHO convention on tobacco control. The Commission has expressed, through its focal point on tobacco and health, an interest in meeting with WHO to discuss the policy aspects of the preparation of the framework convention for tobacco control and to explore the possibilities for further cooperation.

35. The Organisation for Economic Cooperation and Development (OECD) reported that its member countries pursue policies designed to enhance the health status of populations. At the organizational level, OECD, as part of the work of its committees, monitors the taxation of tobacco. Its annual publication, Consumption Tax Trends, lists the specific excise and ad valorem excise taxes on cigarettes, cigars and rolling tobacco, information that facilitates the use of fiscal instruments in the determination of national health policies. OECD has also reduced smoking in its meeting rooms and facilities.

#### D. Non-governmental organizations

36. A large number of non-governmental organizations have also been very active in the struggle to creating a smoke-free environment.

37. The International Federation of Red Cross and Red Crescent Societies, at the Twenty-fifth International Conference of the Red Cross and Red Crescent Movement and at the Fifth General Assembly of the International Federation (then the League) urged its national societies to (a) establish programmes of education and public information on the effects of the use of tobacco; (b) support WHO measures for the implementation of strategies on smoking control; and (c) encourage either a total ban or restrictions or limitations on tobacco advertising. As a result, many national societies, as well as the secretariat of the Federation, including all regional and country delegations,

as well as all vehicles of the Federation - both in Geneva and in the field - became smoke-free as of 1 May 1997.

38. The International Council on Alcohol and Addictions (ICAA), a part of the International Non-Governmental Coalition Against Tobacco, reported that it will co-sponsor with UNCTAD and the European Medical Association on Smoking and Health the organization of a technical round table on alternative nicotine delivery systems. ICAA is also co-sponsoring a workshop at Cairo in May 1997 on methods to reduce smoking: the need for innovative approaches. ICAA is also co-sponsoring the Tenth World Conference on Tobacco or Health at Beijing.

39. The Non-Smokers' Rights Association is very supportive of the development of an international instrument on tobacco control, and has already cooperated with WHO in the preparatory work leading up to the adoption of the WHO resolution on a framework convention.

40. The International Air Transport Association has been monitoring the initiatives taken by its member airlines to implement partial or total bans of smoking on board aircraft, and in 1995 considered the issue of a voluntary worldwide ban on smoking. There was majority support for some form of joint industry action on that matter, but agreement could not be reached on a non-binding establishment of "recommended practice". It was felt that the issue had significant commercial implications, so that it would be ineffective in the marketplace, and that action was better left to the discretion of individual airlines.

41. The International Council of Nurses, consistent with its strategic mission to promote healthy public policy and social well-being worldwide, has been working closely with its constituent national nurses associations in over 112 countries to collaborate in a concerted fight against tobacco use in all its forms. It has sent a letter of protest to the Director-General of the European Commission opposing support for a round table on the theme "Europe of the regions" organized by the tobacco company Phillip Morris; has condemned the use of threats or trade sanctions to compel nations to increase importation of tobacco products; has adopted a smoke-free policy and banned smoking in its offices; has developed for the 1997 International Nurses Day a resource kit on the theme "Healthy young people: a brighter tomorrow", which dealt with the prevention of tobacco use by young people; and disseminates information to its member national nurses associations on the health hazards of tobacco use and its prevention through its official journal, the International Nursing Review.

42. World Vision International has reported that it continues to carry on extensive health education against tobacco and its ill effects on health. As a matter of policy, it does not support any income-generation projects linked to tobacco, nor does it accept any donations from such sources. Its offices are totally smoke free, both for staff and visitors. It supports the development of a comprehensive framework convention on tobacco control; however, it favours a total ban on the production, sale, purchase, import, export, storage and use of tobacco in all countries.

43. The Asian Consultancy on Tobacco Control, through its Director, has been a member of the WHO Expert Advisory Panel on Tobacco or Health since 1984, and has

provided consultancy assistance to WHO regional offices on policy development. ACTC has participated in specific missions to support the development of national policy, programmes, legislation and health education projects on tobacco or health in many countries of the Asian region. ACTC also supports the idea of the international framework convention on tobacco control.

44. The International Olympic Committee has cooperated for many years with WHO on several projects to promote healthy lifestyles. The Summer and Winter Olympic Games have been proclaimed smoke free since 1988. The Committee co-sponsored the 1996 World No-Tobacco Day, which was dedicated to the theme "Sport and the arts without tobacco: play it tobacco free".

45. Many of the Scout associations of the World Organization of the Scout Movement have developed educational programmes for tobacco-free societies. Learning how to avoid taking drugs, including tobacco and alcohol, is the subject of youth programmes promoted by the organization in several countries and supplemented through publications and educational materials.

46. A number of non-governmental organizations in Brazil (the National Cancer Institute of Brazil, along with the Brazilian Tobacco Control Coordinating Committee, the National Heart Foundation, the Latin American Women's Association) sponsored and organized the First Latin American Congress on Tobacco Dependency and the Second Brazilian Congress on Tobacco Dependency at Fortaleza, Brazil, in June 1996. The Congress, which was well attended and included delegates from Latin America's Tobacco Control Coordination Committee, focused on various tobacco-related subjects, such as environmental impact, alternative crops, active and passive smoking, nicotine as an addictive drug, analysis of cigarette chemicals, tobacco advertising and marketing, the impact of tobacco consumption on women and agricultural alternatives to tobacco production. Discussions led to the adoption of a number of recommendations concerning strategies for tobacco control in Brazil through the official global plan for 1996-2000, and similar strategies for other Latin American countries were considered.

47. On the same occasion and inspired by the WHO World No-Tobacco Day theme "Sports and the arts without tobacco", the United Nations system focal point launched the initiative for an international mountain-climbing expedition against smoking. An expedition of 28 climbers against smoking successfully reached the summit to Aconcagua, the highest mountain in the world outside Asia, on 14 January 1997. The expedition was totally self-financed and co-sponsored by the government of Mendoza, the Argentine Union Against Smoking and the Secretariat of Sports of the Government of Argentina.

48. The International Union Against Cancer established GLOBALINK, an intranet service, which operates through a system of electronic conferences at which tobacco-related subjects are discussed and information exchanged. These have included such topics as tobacco control legislation, litigation, tobacco advertising, tobacco and children and youth, tobacco and women, and health-related aspects of tobacco consumption. GLOBALINK has proposed that a special fund be allocated to network communications, by providing appropriate communications equipment (Internet) to all countries, which could greatly improve tobacco control and could significantly assist countries in the

implementation of tobacco-control legislation based on the experience of other countries.

49. The Tenth World Tobacco Conference on Tobacco or Health (24-28 August 1997) is being hosted by the Chinese Association on Smoking and Health and the Chinese Medical Association. The Theme of the Conference, "Tobacco: the growing epidemic", has been chosen to reflect the increasingly global nature of the problem. The location of Beijing for the Conference is particularly important, since China is the largest cigarette producer and consumer in the world, with three hundred million smokers consuming 30 per cent of the world's cigarettes.

## II. CONCLUSIONS AND RECOMMENDATIONS

50. Over the two-year period under review, a number of important events have contributed to a significant change in the international tobacco control situation, the most important of which is growing public awareness of the public health risks associated with tobacco consumption, which has led Governments, especially in the advanced countries, to adopt stronger legislation on tobacco production, processing, marketing and use, especially in public places.

51. A turning point was reached recently in the international struggle to control the operations of the biggest tobacco multinationals, when a number of major tobacco transnationals - some of which have recently admitted that tobacco is addictive and causes cancer and heart disease - met with anti-smoking groups and officials of the Government of the United States of America to discuss the terms of a settlement on a very large number of liabilities. According to reliable press sources, those multinationals are willing to accept government regulation, and would be prepared to pay as much as \$300 billion over the next 25 years in the form of a fund under which smokers could seek compensation.

52. So too, newly industrialized countries and countries with economies in transition have become more sensitized to the dangers of tobacco, and in many of them the media are actively promoting the adoption of stricter legislation. Moreover, the statistical evidence points to a growing pandemic of health risks related to tobacco consumption, as multinational tobacco companies seek to expand their markets in countries of the developing world to compensate for the loss of traditional markets in the developed countries.

53. On the intergovernmental level, more and more organizations have begun to address tobacco-related questions, either by banning tobacco in the workplace or by adopting policies relevant to their work programmes. Particularly noteworthy, especially as they concern advocacy, have been the efforts of several elements of civil society; their activities have been effective in promoting action at the international and national levels, in supporting legislation and in informing users of the global nature of the problem.

54. Another major change during the last two years in the field of tobacco control has been the impact of the development of the Internet, a technological revolution which, at a very low cost, has provided access to the latest, generally reliable global information on tobacco on a 24-hour basis. As

proposed by GLOBALINK, that is an area that presents the greatest potential for action in the immediate future.

55. In compliance with Council resolutions on tobacco or health, the United Nations system focal point has consolidated contacts with Governments, intergovernmental and non-governmental organizations. That process has expanded notably, thanks to the Internet, which has facilitated access to information (although it presents a challenge in controlling and usefully managing the mass of data collected). Much remains to be done, however, in terms of implementation of World Health Assembly resolution 46.8.

56. Concerning the future of the Tobacco or Health Programme, a commitment to providing a minimal level of resources for such activities will be essential if the United Nations system is to respond effectively to all the new requests for action on the issues discussed in the present report. One option would be to establish a voluntary trust fund to finance the main activities of the United Nations system focal point. A small amount of resources allocated to the United Nations system to mobilize a coordinated international response to the challenge of developing effective tobacco control policies could make a significant impact due to the networking arrangements and links established with governmental, intergovernmental, non-governmental and civil society organizations. There is a need to create a minimal capacity for undertaking related activities in order to fully tap the complementarity resources and potential of those institutions.

Annex I

FORTY-EIGHTH WORLD HEALTH ASSEMBLY

Resolution WHA48.11

An international strategy for tobacco control

The Forty-eighth World Health Assembly,

Recalling and reaffirming resolutions WHA33.35, WHA39.14, WHA43.16 and WHA45.20, all calling for comprehensive multisectoral, long-term tobacco strategies and outlining the most important aspects of national, regional and international policies and strategies in this field,

Recognizing the work carried out by the Organization in the field of tobacco or health, and noting that the plan of action of the "tobacco or health" programme for 1988-1995 comes to an end this year,

Noting that the Director-General and the Secretariat contributed to the success of the Ninth World Conference on Tobacco and Health (Paris, October 1994) at which an international strategy for tobacco control was adopted covering the essential aspects of WHO policy in this field: curbing of the promotion of tobacco products, demand reduction particularly among women and young people, smoking cessation programmes, economic policies, health warnings, regulation of tar and nicotine content of tobacco products, smoke-free environments, and marketing and monitoring,

1. COMMENDS the International Civil Aviation Organization response to ban smoking on all international flights as of 1 July 1996;
2. URGES those Member States that have already successfully implemented all or most of a comprehensive strategy for tobacco control to provide assistance to WHO, working with the United Nations system focal point on Tobacco or Health (located in United Nations Conference on Trade and Development), so that these bodies can effectively coordinate the provision of timely and effective advice and support to Member States seeking to improve their tobacco control strategies, including health warnings on exported tobacco products;
3. REQUESTS the Director-General:
  - (1) to report to the Forty-ninth World Health Assembly on the feasibility of developing an international instrument such as guidelines, a declaration, or an International Convention on Tobacco Control to be adopted by the United Nations, taking into account existing trade and other conventions and treaties;
  - (2) to inform the Economic and Social Council of the United Nations of this resolution;

(3) to strengthen WHO's advocacy role and capacity in the field of "tobacco or health" and submit to the Forty-ninth World Health Assembly a plan of action for the tobacco or health programme for the period 1996-2000.

Twelfth plenary meeting, 12 May 1995

A48/VR/12

Annex II

FORTY-NINTH WORLD HEALTH ASSEMBLY

Resolution WHA49.17

International framework convention for tobacco control

The Forty-ninth World Health Assembly,

Recalling resolutions WHA29.55, WHA31.56, WHA33.35, WHA39.14, WHA43.16 and WHA45.20, all calling for comprehensive, multisectoral, long-term tobacco control strategies,

Noting with satisfaction that the Director-General has prepared a report on the feasibility of developing international instruments for tobacco control, as requested by resolution WHA48.11, and that this report concludes that the development of such instruments is feasible,

1. URGES all Member States, and, where applicable, organizations of the United Nations system and other international organizations progressively to implement comprehensive tobacco control strategies that include the measures referred to in resolutions WHA39.14 and WHA43.16 as well as other appropriate measures;
2. URGES Member States to contribute the necessary extrabudgetary resources to permit the implementation of this resolution;
3. REQUESTS the Director-General:
  - (1) to initiate the development of a framework convention in accordance with Article 19 of the WHO Constitution;
  - (2) to include as part of this framework convention a strategy to encourage Member States to move progressively towards the adoption of comprehensive tobacco control policies and also to deal with aspects of tobacco control that transcend national boundaries;
  - (3) to inform the Secretary-General of the United Nations of this initiative, and to request the collaboration of the United Nations system, coordinated through the United Nations system focal point on "tobacco or health";
  - (4) to keep the Health Assembly informed of the development of the framework convention in his biennial reports to the Health Assembly on the progress and effectiveness of Member States' comprehensive tobacco control programmes, as called for in resolution WHA43.16.

Sixth plenary meeting, 25 May 1996

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## Economic and Social Council

Distr.  
GENERAL

E/1997/63  
21 May 1997

ORIGINAL: ENGLISH

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Substantive session of 1997  
Geneva, 30 June-25 July 1997  
Item 6 (e) of the provisional agenda\*

COORDINATION, PROGRAMME AND OTHER QUESTIONS: JOINT AND CO-SPONSORED  
UNITED NATIONS PROGRAMME ON HUMAN IMMUNODEFICIENCY VIRUS/ACQUIRED  
IMMUNODEFICIENCY SYNDROME

Note by the Secretary-General

1. The Secretary-General has the honour to transmit to the Economic and Social Council the report of the Executive Director of the United Nations Joint and Co-sponsored Programme on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS), prepared pursuant to Council resolution 1996/47 (see annex).
2. The Secretary-General also takes this opportunity to inform the Council of action already taken, or proposed to be taken in the future, to implement provisions of resolution 1996/47 addressed to specific action to be taken by him or by the United Nations Secretariat.
3. It will be recalled that the Economic and Social Council, in its resolution 1996/47, called, inter alia, for the Secretary-General to play a greater advocacy role in regard to the serious threat posed by the spread of HIV/AIDS in order to raise global awareness and thus help to prevent the further spread and for the United Nations Secretariat to be fully and effectively involved in the fight against HIV/AIDS. In seeking to implement those requests, the Secretary-General intends to monitor the progress of the Programme on HIV/AIDS through the Administrative Committee on Coordination (ACC). He would also raise the relevant issues in his discussions concerning HIV/AIDS with leaders and in his statements, on appropriate occasions. The United Nations Secretariat has held consultations with representatives of the Programme and has established an interdepartmental working group to coordinate the support to be provided by the

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\* E/1997/100.



Secretariat to the Programme, particularly in the area of greater advocacy, and to study the socio-economic dimensions of the HIV/AIDS epidemic. This will entail the involvement of several Secretariat units from the areas of policy coordination, economic and social information and policy analysis, peacekeeping, human rights, communications and media services, and personnel and medical services.

4. The establishment of a United Nations focal point within the Department for Policy Coordination and Sustainable Development would provide for consistent and closer interaction between the Secretariat and the Programme. The Secretariat would follow closely and participate, whenever possible, in the work of the Programme Coordination Board, as an observer. In addition, the substantive and information support capacities in the Secretariat would be utilized more effectively by reflecting, in future reports prepared in the economic and social areas, the socio-economic implications of HIV/AIDS. The regional commissions would be more involved in this work, in order to provide regional perspectives of the problem. In order to raise global awareness, it is envisaged that the United Nations media services will collaborate closely with the Programme and assist in meeting its strategy for creating public awareness.

AnnexREPORT OF THE EXECUTIVE DIRECTOR OF THE JOINT AND CO-SPONSORED  
UNITED NATIONS PROGRAMME ON HUMAN IMMUNODEFICIENCY VIRUS/  
ACQUIRED IMMUNODEFICIENCY SYNDROME

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## INTRODUCTION

1. This report is submitted pursuant to Economic and Social Council resolution 1996/47 of 26 July 1996, in which the Council decided to review the operations and activities of the Joint and Co-sponsored United Nations Programme on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome in alternate years, beginning in 1997. As requested in the resolution, this report of the Executive Director of the Programme has been prepared in collaboration with the relevant specialized agencies, the United Nations Secretariat and other organizations and bodies of the United Nations system, and is submitted through the Secretary-General to the 1997 substantive session of the Council.

2. The report focuses on the approach adopted by the United Nations system to respond to the human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), gives illustrative examples of activities undertaken by the United Nations system, and presents challenges and opportunities facing the agencies, organizations and bodies of the United Nations system in responding to HIV/AIDS. It also indicates the action that the Secretary-General has already taken and proposes to take in the future to implement the provisions of resolution 1996/47. As per resolution 1996/47, a comprehensive report will be presented on a biennial basis to the Council, beginning in 1999, on the progress made in the response to HIV/AIDS and its impact on the countries affected.

### I. STATUS OF THE HIV/AIDS EPIDEMIC

3. The HIV/AIDS epidemic continued to expand in 1996 with an estimated 3.1 million new infections - approximately 8,500 a day. Nearly half of the new infections occurred in women, and the majority of newly infected adults are under 25 years old. Of the estimated worldwide total of 22.6 million people living with HIV/AIDS, 21.8 million are adults and 830,000 are children. During 1996, HIV/AIDS-associated illnesses caused the death of an estimated 1.5 million people, including 350,000 children. This represents about 25 per cent of all HIV-related mortality since the beginning of the epidemic.

4. The global epidemic has been fuelled by a number of explosive regional epidemics. In Asia, for example, the Chinese Academy of Preventive Medicine has estimated that there were 10,000 HIV-infected persons in China as of the end of 1993, and that this total grew tenfold, to 100,000, by the end of 1995. During the same time period, HIV rates among certain groups of injecting drug users in Viet Nam climbed from 9 to 45 per cent, and in Bombay, India, over the past few years, HIV prevalence has reached 36 per cent in people seeking care for a sexually transmitted disease (STD), and 2.5 per cent in pregnant women attending clinics for antenatal care. New epidemics are also expanding at alarming rates in countries undergoing transition in Eastern Europe. In Ukraine, the number of newly reported HIV infections increased eightfold from 1995 to 1996 when 11,000 new cases were registered, most in injecting drug users. Similarly, disturbing trends have been observed in the Russian Federation.

5. In sub-Saharan Africa, over 14 million persons are living with HIV/AIDS today. Surveys in many countries continue to show that over 10 per cent of the

women attending antenatal clinics in urban areas are HIV-infected, with rates exceeding 40 per cent in some surveillance sites in southern Africa. Epidemics are also increasingly taking hold among women, adolescents and children in Latin America and the Caribbean. For example, HIV prevalence among pregnant women in the Dominican Republic reached 8 per cent in 1996, and recent studies in Haiti have shown even higher HIV rates among pregnant women aged 14-24. In Brazil, it is estimated that nearly 200,000 children have either already lost their mother to HIV-related infections or are children whose mothers are living with HIV/AIDS.

6. As a result of better medical management, including the increasing use of anti-retroviral combination therapy, mortality from HIV infection has decreased over the past year in several industrialized countries. Notwithstanding these successes, the situation remains troubling as younger generations confront the epidemic. In the United States and Western Europe, despite considerable success in prevention efforts over the past decade, HIV transmission through sexual intercourse and among injecting drug users continues. Furthermore, as progress is made in treatment, a new complacency in behaviour appears to be developing.

7. Although the introduction of antiretroviral combination therapy in 1996 was a major breakthrough in terms of treatment, regrettably, the cost makes the treatment unaffordable to 90 per cent of the people living with HIV/AIDS. Relatively inexpensive drugs for opportunistic illnesses do, however, exist, and much more could be done in terms of providing better access to those drugs, care and counselling. In the area of vaccine development, which is still underfunded both in academia and industry, there has been little real progress.

8. The impact of the epidemic on individuals, households, and society as a whole has been worsening. HIV/AIDS causes and exacerbates poverty, even in situations where communities, community-based organizations and non-governmental organizations provide assistance to families in distress. In the private sector, evidence has continued to accumulate that HIV/AIDS has a significant negative impact on productivity and the cost of labour - costs that more than justify implementing HIV-prevention activities in the workplace. Moreover, positive trends in life expectancy have been reversed. In 15 countries in sub-Saharan Africa, for instance, there is an estimated reduction of about 10 years in life expectancy by the year 2000, compared to projections before AIDS.

9. Although the epidemic has continued to worsen in many parts of the world, in an increasing number of developing country settings, prevention efforts appear to have reduced HIV transmission:

(a) HIV prevalence rates have remained relatively low (in the 2-5 per cent range) and more or less stable in the adult populations of several African cities (for example, Cotonou, Benin; Dakar, Senegal; Libreville, Gabon; and Yaoundé, Cameroon). Studies supported in the Programme on HIV/AIDS investigating the reasons for these low, stable, prevalences should contribute to more effective prevention approaches elsewhere;

(b) Between 1990-1993 and 1994-1995, HIV prevalence in pregnant women at some sentinel sites in urban Uganda diminished by 35 per cent in young women

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aged 15-24. Surveys of these populations suggest that change in behaviour accounts for an important proportion of the reported declines;

(c) In a randomized study in the Mwanza region of the United Republic of Tanzania, a reduction of up to nearly 40 per cent in new HIV infections was achieved through the implementation of a comprehensive public health STD-prevention and care programme;

(d) In Thailand, HIV prevalence in military conscripts dropped from 3.6 per cent in 1993 to 2.5 per cent in 1995;

(e) A recent international study, supported by the World Health Organization (WHO), has shown that it is possible to prevent HIV among injecting drug users through the early and vigorous implementation of prevention activities, such as community outreach, demand reduction, methadone treatment and needle-and-syringe exchange programmes.

## II. RESPONSE OF THE UNITED NATIONS SYSTEM TO THE EPIDEMIC

### A. Strategic approach

#### 1. Establishment, governance and purpose of UNAIDS

10. In an attempt to expand the response of the United Nations system to HIV/AIDS, the Economic and Social Council endorsed the establishment of a joint and co-sponsored United Nations programme on human immunodeficiency virus/acquired immunodeficiency syndrome in its resolution 1994/24 of 26 July 1994. The Programme, which became fully operational on 1 January 1996, serves as the main advocate for global action on HIV/AIDS, pooling the experiences, efforts and resources of its six co-sponsors: the United Nations Children's Fund (UNICEF), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO), and the World Bank. The Programme is governed by a Programme Coordinating Board, with a rotating composition, as decided by the Council in decision 1995/223 of 5 May 1995. A Committee of Co-sponsoring Organizations (CCO), comprised of the executive heads of each co-sponsoring organization or their designated representatives, was established in September 1994 by the Council in resolution 1994/24, to serve as a forum in which the policies and strategies of the Programme on HIV/AIDS are considered on a regular basis by the co-sponsoring organizations.

11. As the main advocate for global action on HIV/AIDS, the Programme will lead, strengthen and support an expanded response aimed at preventing the transmission of HIV, providing care and support, reducing vulnerability of individuals and communities to HIV/AIDS, and alleviating the impact of the epidemic. The strategic focus of the Programme is:

(a) To strengthen the capacity of the United Nations system, especially that of the co-sponsors, to assist Governments and civil society to respond to HIV/AIDS;

(b) To build worldwide political commitment and support to respond to HIV/AIDS;

(c) To improve the content, access and use of the body of knowledge needed to accelerate the global response to HIV/AIDS.

With input from the co-sponsors, a system to monitor and evaluate the work and effectiveness of the Programme is being developed. Performance monitoring and evaluation will be carried out on several levels - goods and services delivered by the Programme secretariat; action by the United Nations system at country and global levels; outcomes at the national level, particularly those related to expanded national responses and global HIV/AIDS goals, including status and trends in the epidemic.

## 2. Roles of agencies, organizations and bodies of the United Nations system

12. The co-sponsors of the Programme are the main instruments of the United Nations system for developing and implementing HIV/AIDS programmes and projects. In addition to specific HIV/AIDS activities, the co-sponsors are integrating - or mainstreaming - HIV/AIDS activities into programmes and programme areas. Other agencies, including the United Nations International Drug Control Programme (UNDCP), are also addressing HIV/AIDS within their overall framework for support and assistance. A key element in the global strategy of the United Nations High Commissioner for Refugees (UNHCR) is to ensure that HIV/AIDS services are an integral part of the basic health services provided to refugees and displaced populations. HIV/AIDS is addressed in the personnel policies of all the organizations in the United Nations system, and workshops and training courses are provided to increase awareness of staff to HIV/AIDS. Special HIV/AIDS-related training is also provided to United Nations peacekeepers.

13. Advocacy and public information by the Programme secretariat and co-sponsors are an important part of the overall strategic approach. These efforts aim at increasing the level of awareness of the global epidemic and building a sense of urgency regarding the need to mount an effective response to it worldwide. Part of the message has been that efforts to address the many challenges posed by the epidemic more effectively must increasingly take into account the social, political, economic, cultural, ethical and technological determinants of health and development. Many of the international and regional conferences and seminars on HIV/AIDS which are arranged by the United Nations system serve an advocacy function, while others relate more directly to the normative function of the work of the Programme and its partners.

## 3. Global, regional and country-level mechanisms

14. In responding to the epidemic, the Programme secretariat and co-sponsors are working together at the global, regional, intercountry and country levels. Mechanisms are being developed to facilitate sharing ideas and experiences, joint planning, division of roles and responsibilities, and effective coordination to ensure maximum impact. In order to respond effectively to

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HIV/AIDS, it is necessary for the Programme secretariat and co-sponsors, specialized agencies, other organizations and bodies of the United Nations system to work together with Governments, bilateral agencies, non-governmental organizations and other civil society organizations, the private sector and the media. Developing and strengthening partnerships and undertaking joint activities is therefore an important part of the strategic approach of the Programme.

15. At the global level mechanisms for joint planning and cooperation among the co-sponsoring organizations include inter-agency working groups on several different issues, including global surveillance on HIV/AIDS and sexually transmitted diseases, communication, gender, children and HIV/AIDS, integrating HIV/STD prevention in the school setting, and especially vulnerable young people. The Inter-Agency Advisory Group on AIDS (IAAG), which has been in existence since 1988, continues to be an important forum for regular dialogue among the agencies and organizations of the system on substantive programme and personnel policy issues. At the regional level, mechanisms are being established to ensure the effective coordination of the regional and intercountry activities of the co-sponsors and the Programme secretariat.

16. As recommended by the Council and the Programme Coordinating Board, an appeal for supplemental funded activities was initiated to mobilize additional resources so that co-sponsors could strengthen their efforts at the global and regional levels to support expanding HIV/AIDS-related portfolios at the country level. Prior to being included in the appeal, and in order to clarify roles and harmonize programme approaches, the secretariat proposed activities are jointly reviewed and agreed upon by the co-sponsors and the Programme secretariat. However, the coordinated appeal prepared for 1996-1997 has been far from successful in mobilizing the essential resources needed.

17. At the country level, assistance is provided to strengthen national capacities to develop a more effective response to the many challenges posed by the epidemic to a broad range of development issues. Theme groups on HIV/AIDS are the primary instruments for coordinating the response of the United Nations system to the epidemic at the country level and for promoting more effective programming and collaborative actions in support of national responses. The work of the theme groups is supported by country programme advisers and focal points, who are drawn from among UNDP national programme officers for HIV and staff from other co-sponsoring organizations.

#### B. Financial and human resources

18. The exact level of financial support for HIV/AIDS activities provided by the different organizations in the United Nations system is difficult to estimate, since HIV/AIDS activities in many countries are an integral part of broader programmes and projects. Table 1 summarizes the estimated financial support provided by the Programme secretariat and co-sponsors for HIV/AIDS and related activities in 1996. The activities of the different organizations may, however, be rather different in nature, and expenditures may be recorded differently. World Bank assistance is primarily provided through loans, whereas assistance provided by the other organizations is in the form of grants. For

several reasons, therefore, the figures given below, which relate to the first full year of operations of the Programme are not directly comparable. They can, however, be used as baseline data against which to monitor levels of support and trends in resource flows.

Table 1. Estimated financial support provided by the Programme on HIV/AIDS and co-sponsors, for HIV/AIDS and related activities, 1996

| Organization          | Global/<br>regional level | Country-level | Total      |
|-----------------------|---------------------------|---------------|------------|
| Programme on HIV/AIDS | 13 794 000                | 15 467 000    | 29 261 000 |
| UNDP                  | 2 100 000                 | 30 500 000    | 32 600 000 |
| UNICEF                | 6 900 000                 | 18 000 000    | 24 900 000 |
| UNFPA                 | 1 000 000                 | 19 500 000    | 20 500 000 |
| WHO                   | 2 203 000                 | 9 355 000     | 11 558 000 |
| UNESCO                | 3 045 000                 | 1 000 000     | 4 045 000  |
| World Bank            | 500 000                   | 84 930 000    | 85 430 000 |

19. The figures in table 1 exclude staff costs and are based on data presented to the Programme Coordinating Board.<sup>1</sup> The amounts indicated for the Programme are estimates as at 15 February 1997. The figures given for UNDP include only UNDP's own funding for specific HIV/AIDS activities and do not include World Bank cost-sharing amounting to \$34 million, or other expenditures for HIV/AIDS-related activities. UNICEF figures do not include general resources for regional activities and supplementary funding for country-level activities, for which figures were not available. The UNFPA figures are based on 1996 project allocation data since final expenditure figures were not available. The WHO figures do not include estimates related to mainstreaming of HIV/AIDS/STD into activities of a total of more than 20 programmes and divisions at headquarters and within regional offices. They also do not include the posts financed by the Programme at headquarters, the regional and country levels (seven Professionals), or regional office activities funded by the Programme (\$2.06 million). Finally, they ignore the \$360,000 WHO provided towards the Programme core budget in 1996.

20. Of the total of \$84.93 million in loans for HIV/AIDS activities which were provided by the World Bank in 1995-1996, the single biggest recipients were Kenya (\$40 million) and Indonesia (\$24.8 million). Other countries which received loans for free-standing HIV/AIDS projects or projects with an HIV/AIDS component during the period were Benin, Bulgaria, Cameroon, Chad, China, Côte d'Ivoire, Georgia, Kyrgyzstan and Sierra Leone. Most of the World Bank financing was provided to countries for the development of strategies and the provision of services. In addition to the amounts given above, in 1996 the

World Bank provided \$1 million towards the Programme core budget and \$1.022 million to support regional initiatives (in South-East Asia and West Africa) outside the core budget.

21. At the Programme secretariat in Geneva, a total of 42 Professional and 34 General Service posts have been filled, which represents three quarters of the total number of approved posts. In addition, the Programme has 12 intercountry technical advisers and 37 country programme advisers working at the regional and country levels. One staff member each from UNICEF, UNDP, UNFPA and UNESCO, and the World Bank has been seconded to support the work of the Programme secretariat. At WHO headquarters three Professional and two General Service posts are allocated for HIV/AIDS. At the regional and country level, WHO has a total of 15 Professional posts and six General Service posts for HIV/AIDS activities. In 1996, UNDP had six Professional posts and six support staff posts for global HIV/AIDS-related activities, seven Professional posts and seven General Service staff for regional programmes in the field (sub-Saharan Africa, and Asia and Pacific) and 22 national programme officers for HIV in UNDP country offices. Within the United Nations Secretariat, there are no specific posts assigned exclusively for HIV/AIDS-related issues in support of the Programme. However, staffing resources from certain units of the Secretariat are utilized, in part, to address HIV-related issues in support of the Programme. In light of the call in resolution 1996/47 for greater involvement of the United Nations Secretariat in the fight against HIV/AIDS, it is envisaged that this support will increase.

### C. Selected activities

#### 1. Surveillance and research

22. A Working Group on Global Surveillance of HIV/AIDS and sexually transmitted diseases has been established by WHO and the Programme secretariat, and surveillance activities in WHO regional offices have been strengthened. The development of country-specific epidemiological fact sheets has been initiated to track key indicators on the status and trends of the epidemic so as better to understand the dynamics of the epidemic. These efforts will be reinforced by those of the Collegial Network for the Monitoring of the Status and Trends of the Global HIV/AIDS Epidemic (MAP Network), a collaborative effort undertaken by the secretariat, Harvard University and the AIDS Control and Prevention (AIDSCAP) Project of Family Health International. The Population Division of the United Nations Secretariat prepares world population estimates and projections, based on prevalence data and epidemiological models developed by WHO and the Programme secretariat, and data on the expected demographic impact of HIV/AIDS appear biennially in the United Nations publication, World Population Prospects, which is made available throughout the United Nations system and worldwide. With the support of UNESCO, two Centres for Biological Research on AIDS have been established, in France and in Côte d'Ivoire. Both Centres are part of a larger global network of institutions conducting research related to HIV/AIDS.

23. UNDP regularly undertakes research on the socio-economic causes and consequences of the epidemic. In 1996 a series of papers and a book was

produced on the economic and social aspects of the epidemic in Asia and the Pacific. Recent research undertaken by the World Bank analyses the epidemiology of HIV, public health insights into disease control, and economic issues, with a view to assessing trade-offs in the allocation of scarce resources and thus guiding policy decisions. The International Labour Office (ILO) has carried out specific research on the consequences of AIDS on manpower and labour supply and on social security schemes. Research and studies undertaken by the United Nations Secretariat on demographic, social and economic issues also have relevance for the response of Governments to HIV/AIDS issues. Some of them have highlighted the effects of the pandemic on productivity and economic growth and the effects of structural adjustment policies and reductions in levels of official development assistance in some developing countries on the capacity of those countries to contain the pandemic.

24. Assessments of the situation and dynamics of the epidemic in the countries of Eastern Europe have been carried out by the Programme secretariat and WHO in order to identify vulnerable populations and guide decision makers in the establishment of national HIV/AIDS prevention and control programmes. In several countries in Asia and the Pacific, UNDP has supported research on the socio-economic impact of HIV/AIDS. In high-risk border areas of China, Myanmar and Thailand, assessment of the HIV/AIDS situation have been carried out by the Economic and Social Commission for Asia and the Pacific (ESCAP), UNDCP and UNDP. A number of studies on the socio-economic effects of HIV/AIDS on agriculture have been undertaken by the Food and Agriculture Organization of the United Nations (FAO) and form the basis for their published material on the matter. The most recent studies on the subject of HIV/AIDS and agriculture, which focus on Burkina Faso and Côte d'Ivoire, were carried out by FAO with UNDP assistance. In Israel UNESCO supported a study with the Hadassah Medical Organization on HIV/AIDS and migrant populations.

25. In Uganda and Thailand, the Programme secretariat is coordinating research on behavioural changes so as better to comprehend the declining prevalence of HIV in those countries. Confirming the links between effective national AIDS programmes, safer behaviour, and a reduction in HIV transmission is expected to provide a better understanding of why some programmes are more effective than others. A multi-site study on the underlying factors determining the differential spread of HIV infection in African towns was recently launched in Benin, Cameroon, Kenya, and Zambia.

## 2. Information exchange, education and training

26. To facilitate and improve communication and information exchange between individuals or organizations working on HIV/AIDS, a number of electronic networks have been established. Programme intercountry teams facilitate the exchange of information through the development of networks operating within regions. Networks established for scientists cover the implications of HIV variability for transmission, pathogenesis, diagnostics, blood safety and vaccine development. UNDP-funded activities support a number of networks concerned with legal, ethical and human rights, people living with HIV/AIDS, and training and regional workshops. Support from UNICEF has been provided to strengthen regional networks to facilitate the exchange of information on

strategies for children and families affected by HIV/AIDS, life skills, HIV/AIDS school programmes, and best practices related to HIV/AIDS prevention.

27. UNESCO hosted a regional seminar on AIDS and education in Eastern and Southern Africa in 1995 to mobilize support for the integration of HIV/AIDS into school curricula. In the same year, UNESCO sponsored an international conference on school health education and HIV/AIDS prevention, which brought together representatives of teachers' organizations from 118 countries. Together with UNESCO, WHO arranged a workshop on school health education and HIV/STD prevention for the Latin American region in Costa Rica in 1996. In 1995, FAO arranged a workshop in Malaysia on AIDS and its implications for agricultural extension which was attended by representatives of agricultural ministries, training institutions, universities and non-governmental organizations. The United Nations Secretariat is monitoring national responses to the Copenhagen Declaration on Social Development<sup>2</sup> and the Beijing Declaration,<sup>3</sup> both of which call for national action relevant to education and prevention services, each concerned respectively with social and gender-sensitivity issues. The United Nations Secretariat will address these issues as part of its overall responsibility to coordinate the implementation of those conferences.

### 3. Advocacy and public information

28. Advocacy and public information by the Programme secretariat and co-sponsors has already changed public perceptions of HIV/AIDS in many countries, owing to events such as the Eleventh International Conference on AIDS, held in Vancouver in July 1996; the celebration of World AIDS Day and of World Population Day, which in 1996 was dedicated to the theme of HIV/AIDS; and the prominent featuring of HIV/AIDS at the World Economic Forum in Davos in February 1997. Public information campaigns, such as the one entitled "Working with new generations for a safer world", launched by the Programme secretariat and Rotary International, are also changing public opinion of the epidemic.

29. Other specific public information activities undertaken by the co-sponsors include the production and dissemination of pamphlets, posters, videos and post-cards, and the establishment of AIDS information and dissemination centres in selected UNESCO country offices. Efforts by the United Nations Secretariat to take on a greater advocacy role have been made within the context of specific themes such as human rights, women and gender issues. As a result, HIV/AIDS is now included in country analyses prepared for the Committee on Economic, Social and Cultural Rights and seen as part of the implementation of the Programme of Action of the World Summit for Social Development<sup>4</sup> and the Platform for Action of the Fourth World Conference on Women.<sup>5</sup> ILO has promoted HIV/AIDS awareness in the workplace, protection of the employment rights of people living with HIV/AIDS, and the health needs of workers who are occupationally exposed to HIV/AIDS.

30. During 1996, UNFPA supported HIV/AIDS prevention activities in a total of 124 countries in such activities as supply and distribution of condoms, preventive counselling, and training of reproductive health information and service providers. Other activities included in-school and out-of-school

educational activities, campaigns, exhibitions, distribution of materials and use of the mass media to promote HIV/AIDS awareness. Throughout 1996, the work of UNICEF in the area of HIV/AIDS focused on programmes to reduce transmission among women, children and young people; information and communication to promote informed and responsible behaviour; promotion of improved reproductive health services; protection of children from sexual exploitation; and, reduction of mother-to-child transmission.

31. UNDP support was provided to HIV and development workshops and other training activities in a large number of countries. UNESCO arranged two workshops, one in India and one in Nepal, on theme Women and AIDS: awareness and self-protection, and arranged for teacher training and curriculum adaptation and renewal activities in the Asia and Pacific region. UNDCP, together with ESCAP, developed and implemented a school and community-based information and media campaign for high-risk border areas of China, Myanmar and Thailand. The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), together with the WHO regional office, developed an educational package consisting of a teachers' guide, student kit and video tapes to increase HIV/AIDS awareness in educational institutions and communities.

32. The United Nations Volunteers Programme (UNV) has started a project with UNDP and the Programme secretariat to support people living with HIV/AIDS in Malawi and Zambia. Under the project people who are infected by HIV or directly affected by AIDS are recruited as national volunteers to work in all aspects of HIV/AIDS prevention, care and support. In 1996 a total of 80 international or national United Nations Volunteers worked on HIV/AIDS-related activities, involving awareness-raising; information, education and communication; strengthening community networks and national AIDS control programmes. Other community-focused activities include support from UNICEF to children orphaned by AIDS and families affected by the epidemic and support from ESCAP and UNDCP to community-based reduction in the demand for drugs and HIV/AIDS prevention in Bangladesh, the Lao People's Democratic Republic, Viet Nam, China and Pakistan. As part of integrated community development projects, the International Fund for Agricultural Development (IFAD) has supported primary health care with an HIV/AIDS sensitization component in Kenya, Uganda and Rwanda.

#### 4. Guidelines and publications

33. Guidelines on HIV/AIDS and human rights were a concrete outcome of the Second International Consultation on HIV/AIDS and Human Rights, which was convened jointly by the United Nations Centre for Human Rights and the Programme secretariat in September 1996, bringing together some 35 experts on human rights, HIV/AIDS and public health. The guidelines underscore that human rights are critical in reducing vulnerability to HIV and that the more human rights are protected, the less people become infected with HIV and the better those who become infected can cope with HIV/AIDS. UNHCR, WHO and the Programme secretariat, through the Inter-Agency Advisory Group on AIDS (IAAG), have produced guidelines for HIV interventions in emergency settings. In addition, a field manual on reproductive health in emergency situations was produced and widely distributed. A booklet entitled "How to protect yourself against

HIV/AIDS" was published by the Department of Peacekeeping Operations, United Nations Secretariat.

34. Policy guidance on various options for infant-feeding to prevent the transmission of HIV through breast milk has been developed jointly by WHO, UNICEF and the Programme secretariat. WHO has recently produced a detailed set of modules on STD case management for health professionals at the local level. English, French, Spanish, Portuguese, Russian and Arabic versions have been, or are being, produced. WHO and UNESCO have jointly developed and disseminated a resource package for curriculum planners on school health education to prevent AIDS and STD and a brochure entitled "HIV/AIDS/STD: education for prevention", which is available in English, French and Spanish. The collaboration between FAO and UNDP related to HIV/AIDS has resulted in two publications: "The effects of HIV/AIDS on farming systems in Eastern Africa" and "What has AIDS to do with agriculture?"

35. Within UNDP, a number of publications have been produced - general issues papers, study papers and working papers on HIV/AIDS and papers and books with a specific regional focus. One of the 1996 publications explored approaches aiming at developing a better understanding of the epidemic and more effective responses in the context of socio-economic development. UNFPA produces an annual report, AIDS Update; the 1996 issue was recently released.

36. Within the Programme secretariat, considerable attention has been given to compiling and sharing international best practices, which are collections of specific topics of strategic importance to the global response to the epidemic. Each of the approximately 50 best practice collections has five components which are regularly updated: technical updates for managers of HIV/AIDS programmes and projects; points of view, which target a wider audience, including journalists; case studies with detailed examples of successful approaches and interventions in specific countries or communities; slides and overhead materials for speeches and presentations; and other printed or audio-visual materials representing up-to-date thinking on the topic. The work of the Programme secretariat in this regard is complemented by that of the co-sponsors, particularly UNICEF's efforts to distil and promote best practice experiences on strategies for families and children affected by HIV/AIDS and on behavioural changes to prevent HIV/AIDS.

#### 5. Capacity-building and policy advice

37. Throughout the United Nations system, efforts have focused on strengthening national capacities to respond to the HIV/AIDS epidemic. In most countries inter-agency cooperation is improving and the United Nations agencies and organizations are increasingly working together with governmental programmes and non-governmental organizations. A primary objective, indeed, has become to strengthen the capacities not only of Governments but also of civil society organizations - e.g., non-governmental organizations, community-based organizations, and networks of people living with HIV/AIDS and networks concerned with ethical, legal and human rights.

38. To coordinate United Nations system support, the theme groups on HIV/AIDS have emerged as the main vehicles. As at the end of January 1997, 126 theme groups had been established, covering 150 countries. In a majority of the countries, the theme group chairperson has been the WHO representative. Increasingly, chairpersons are now from UNDP, with the balance divided among UNICEF, UNFPA and the World Bank. To support the work of the theme groups, 37 UNAIDS country programme advisers have been identified and put in place. In addition, 24 UNAIDS focal points have been nominated by the theme groups in countries where it has not been possible to place a country programme adviser. The majority of the Programme focal points are from UNDP (including UNV), with the remainder from WHO, UNFPA and UNICEF. Administrative support to the work of the theme groups has mainly been provided by UNDP and WHO.

39. Support to strategic planning and the development of a comprehensive and integrated national response has been provided by the theme groups in Bangladesh, Belarus, Botswana, Cambodia, Ghana, the Lao People's Democratic Republic, Malawi, Myanmar, Namibia, Nepal, Poland and Uganda. Since 1994 in Bangladesh, the Lao People's Democratic Republic, China, Pakistan and Viet Nam, ESCAP and UNDCP have also supported the development and implementation of national strategies for community-based drug demand reduction and HIV/AIDS prevention.

40. Specialized agencies have also played an important role by including HIV/AIDS in their work. The United Nations Industrial Development Organization (UNIDO), for instance, has worked in Nigeria to promote appropriate policy options and support for the creation of relevant service industries such as the maintenance industries which are needed to keep HIV/AIDS prevention and control programmes going. With the financial support of UNDP, UNIDO has also assessed the possibilities of initiating or increasing local production of relevant health system contributions in sub-Saharan Africa. The purpose is to improve the accessibility and affordability of HIV-test kits, condoms, syringes and other products used in prevention programmes, information, education and communication technologies, and pharmaceuticals used for treatment.

### III. CHALLENGES AND OPPORTUNITIES

#### A. Supporting an expanded response to the epidemic

41. Joint efforts to mobilize an expanded global response to the epidemic will face old and new challenges. One old challenge is the continuing denial of the epidemic which exists even in heavily affected countries, the more so in those countries that will face enormous consequences once the virus gets ahead of the response. A second challenge is to deal with the new complacency that is eroding the urgency of the response as news about successful treatments dominate media coverage - treatments which are, however, still experimental and unlikely to be available to the overwhelming majority of those who will need them for decades to come. A third challenge is the failure in many places to accept the evidence that HIV prevention works and that the knowledge, tools and strategies required to prevent HIV infection are available and cost-effective and can be adapted to suit local conditions and circumstances.

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42. In many countries, HIV/AIDS continues to be perceived and treated exclusively as a health, or even medical, problem, although there are now good examples of country responses expanding beyond the health sector - e.g., in Thailand, Uganda and Zambia. It is becoming increasingly evident that successful AIDS programmes are those that have broadened their focus from one of short-term risk reduction only to one that encompasses both short- and longer-term vulnerability reduction and emphasizes access to care and impact alleviation. As a consequence, the Programme and its partners will need to promote a combination of approaches which focus on reducing individual risk while simultaneously advocating policy options that can change the social environments that foster the transmission of HIV and the neglect of those affected by AIDS. Continued and sufficient attention needs to be given to the economic, political and social causes and consequences of HIV/AIDS and to circumstances which increase the risk of HIV transmission, such as migration and emergency situations.

43. Advocacy, the sharing of successful multisectoral approaches, political dialogue and the promotion of national strategic planning provide opportunities to broaden the approach from one that focuses on changing individual behaviour to one that deals with how societies treat vulnerable, infected and affected individuals. Efforts must increasingly involve political, business, union, religious, sports, entertainment and community leaders and organizations for the institutional and public policy changes that will enable a broad societal response. A key goal of these efforts must be to promote an environment that allows for greater involvement of people living with HIV/AIDS throughout the policy and programme development processes.

44. Though much experience has been accumulated over the past 15 years, in many settings the response to the epidemic remains insufficiently based on evidence. Programmes and strategies are not easily transferable from one economic, social or cultural situation to another, and improved monitoring and evaluation are necessary in order to accelerate learning about what works under which circumstances. Insufficient documentation of positive experiences may lead to the rejection of effective interventions or continued investment in ineffective interventions. Thus, responses based on evidence need to be promoted, through documentation and research on the effectiveness of interventions and policies and on the obstacles that impede their acceptance.

45. The development of a vaccine against HIV infection must remain a global priority of the first order. Research and development efforts in scientific institutions and in industry should be intensified so as to develop an effective vaccine and the other essential technological tools required to control the epidemic. The Programme secretariat and co-sponsors will need to continue to promote the critical goal of equity in the development of an international research agenda and in the testing of, and timely access to, its products. Since HIV vaccine efficacy trials in humans are likely to begin in the near future, the Programme has an important role to play in helping ensure that they are conducted in accordance with the highest scientific and ethical standards.

46. With the advent of effective - but expensive and complicated - combination therapy for people living with HIV/AIDS, access to care is becoming a major issue in the developing world, where the number of HIV-infected individuals

continues to grow rapidly. Whereas the Programme secretariat and co-sponsors cannot directly provide the resources required to supply anti-retroviral and other drugs, the comparative strength of the co-sponsors needs to be mobilized to develop procurement systems and to leverage international economies of scale to improve access to drugs, including relatively inexpensive ones to treat opportunistic infections. At the same time intensified efforts are needed to provide access to other forms of care and counselling and to strengthen the capacities of communities, community-based organizations and non-governmental organizations to continue supporting the needs of those who are infected or affected by HIV/AIDS.

B. Expanding the response of the United Nations system

47. HIV/AIDS has brought numerous controversial societal and programmatic issues to the forefront, such as those surrounding HIV testing and the infant-feeding decisions faced by infected women with HIV. The United Nations system, with its historic basis in protecting and promoting human rights, is uniquely placed to provide guidance on such difficult issues. To boost the efforts of the system and to give HIV/AIDS the necessary visibility within it as well as outside, special campaigns around the designated themes for World AIDS Day - Children and HIV/AIDS (1997), and Young people and HIV/AIDS (1998) - have been or will be launched.

48. To achieve an expanded response by the United Nations system to the epidemic will require a deeper understanding and more common perception of the issues at the core of the epidemic among the various agencies and their staff. A biennial report on the Programme, to be issued in 1998, on "the state of the world's response to HIV/AIDS" is expected to play an important role in reaching a more common understanding of the key technical, ethical and policy issues surrounding the epidemic. This will be a necessary precondition for the United Nations system to develop explicit HIV/AIDS-related goals to which it can hold itself accountable. This common understanding will also be required if the United Nations system is to be able to offer support, in turn, to countries in their efforts to develop realistic goals. Such country-based goals can challenge both national capacities to achieve what they are able to and the international community to do what it must do to assist them in their efforts.

49. The agencies of the United Nations system together represent a unique and potentially powerful resource in the global response to HIV/AIDS, capable of facilitating policy dialogue and advocacy, providing normative guidance, and leveraging both innovation and development funding. To assist countries effectively in their expanding response to a still growing epidemic, relevant parts of the United Nations system will increasingly need to incorporate HIV/AIDS issues and activities into their programmes, projects and activities. At the country level, the theme groups on HIV/AIDS will need to be better integrated into the resident coordinator system in order to be able to facilitate and catalyse an expanded response. Making the theme groups truly operational is a major responsibility which will continue to challenge the co-sponsors and the Programme secretariat, and will require long-term political, managerial, and financial commitment.

### C. Strengthening co-sponsorship

50. As a joint and co-sponsored programme, the Programme aims at strengthening the capacity of the United Nations system, particularly that of the co-sponsors, to assist Governments and civil society to respond to HIV/AIDS. While the Programme and the co-sponsors have different mandates and operational structures, the challenge is to draw upon the special strengths and capacities of the partners in ways that create synergistic outcomes.

51. Much progress has been made on agreeing on each co-sponsor's area of responsibility and comparative advantage through the coordinated appeal process, the inter-agency working groups and ongoing discussions among co-sponsors and the Programme secretariat. Similarly, although improving communication with and among the numerous programmes, offices, regional bureaux, offices and teams of the Programme co-sponsors and secretariat remains a challenge, there has been progress in this area as well. Scope for continued improved collaboration still exists, but the majority of the harmonization and coordination issues to be resolved do not require new processes or mechanisms. Rather, an increased commitment is required on the part of the Programme secretariat and the co-sponsors to make more effective use of the mechanisms that have been established - inter alia, the Committee of Co-sponsoring Organizations, the coordinated appeal, and inter-agency working group processes.

52. In some countries, the theme groups are developing new and innovative ways of bringing together the United Nations system in more effective support of the national response. While issues such as greater administrative support to theme groups and country programme advisers still need to be resolved, in general the co-sponsors are demonstrating a willingness to work together effectively at the country level and to develop mechanisms for joint programming and collaborative activities. In the future, it would empower the Programme and the theme groups to work more actively through the United Nations resident coordinator system and draw upon the resources available for the purpose, in order to improve further the coordination of the response to HIV/AIDS of the United Nations system at country level. Even if procedures and planning cycles among the co-sponsors vary, some countries have now demonstrated that integrating the HIV/AIDS programme efforts of several co-sponsors is feasible.

### D. Strengthening governance and partnerships

53. The success or failure of the Programme will be measured not only by the performance of its Secretariat, but also by the support of the United Nations system to an expanded response and by the continued political and financial commitment of Governments and the donor community to a longer-term perspective on the epidemic. Two issues will need to be at the heart of the efforts of the Programme in order to strengthen the response of the United Nations system to the epidemic: partnerships and governance. The Programme secretariat is committed to doing its part to develop and strengthen partnerships within and outside the United Nations system and to enable the Economic and Social Council to fulfil its role in ensuring effective coordination with the co-sponsors and their respective governing bodies.

54. At its fourth meeting (Geneva, 7-9 April 1997), the Programme Coordinating Board endorsed the proposed programme budget and workplan for the Programme for the 1998-1999 biennium. The success of the Programme will be critically dependent on substantially increased resources to support HIV/AIDS activities in those countries most affected or threatened by the epidemic. Expanding the response of the United Nations system will only be possible if co-sponsor resources for HIV/AIDS at country, regional and global levels are increased. While several co-sponsors have been able to increase their budgets and all are endeavouring to do more, it is clear that as the epidemic grows and regular programme funds remain stagnant, or are reduced, additional resources will be required. While the Programme secretariat can advocate for, and provide the analysis to support, increased and more effective HIV/AIDS expenditures on the part of the co-sponsors, it is the members of the Programme Coordinating Board and the Economic and Social Council, who also serve on the governing bodies of the agencies and organizations of the United Nations system and in decision-making roles within donor agencies, who are best placed to reinforce an HIV/AIDS priority.

55. In addition to this important role of the Council, individual members may also contribute to an expanded global response to the epidemic by influencing the policies of the countries and institutions that they individually represent, by mobilizing public opinion and political will on various aspects of the HIV epidemic. HIV/AIDS is only occasionally on the development agenda. It is one of the ambitions of the Programme to strengthen the position of HIV/AIDS on the agenda of national Governments, of regional political and development bodies, bilateral and multilateral development agencies, and the international financial institutions.

56. While the first full year of operations of the Programme has been challenging and while initial expectations may have been too high, there have been significant achievements. However, the work to end the pain and suffering of the epidemic has barely begun. Notwithstanding the technological breakthroughs which may take place in the coming years, a sense of realism, urgency and determination is needed, as is a vision that only through a long-term commitment of political will and a doubling and redoubling of efforts will the epidemic first slow down and eventually be contained and defeated. HIV/AIDS is a global problem that the United Nations system is uniquely well placed to address. The Programme looks forward to receiving the continued guidance of the Economic and Social Council on how it can best mobilize an expanded response of the United Nations system and its partners to HIV/AIDS.

#### Notes

<sup>1</sup> UNAIDS/PCB(4)97.6 of 10 March 1997; UNAIDS/PCB(4)/INF.DOC, of 30 April 1997.

<sup>2</sup> See Report of the World Summit for Social Development, Copenhagen, 6-12 March 1995 (United Nations publication, Sales No. 96.IV.8), chap. I, resolution 1, annex I.

<sup>3</sup> See Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995 (United Nations publication, Sales No. 96.IV.13), chap. I, resolution 1, annex I.

<sup>4</sup> See Report of the World Summit for Social Development, Copenhagen, 6-12 March 1995 (United Nations publication, Sales No. 96.IV.8), chap. I, resolution 1, annex II.

<sup>5</sup> See Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995 (United Nations publication, Sales No. 96.IV.13), chap. I, resolution 1, annex II.

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